



The Health & Health Services of the City of Cambridge 1966

BEING THE ANNUAL REPORT OF
THE MEDICAL OFFICER OF HEALTH

*including the School Health Service
Chief Public Health Inspector's
and other Reports*

The severe pressure under which the local authority services have worked grows steadily more intolerable. Education of the public by mass media on what services they can get and should expect, backed by pressure from the Central Government for their provision or supplementation by a spate of circulars, regulations and new legislation, can only lead to increased demand for high quality services. Difficulties in recruitment of many types of staff within the establishment, inability to increase establishment where needed and severe restriction on the annual budget must lead to inadequate services both in quantity and quality. But the demand for good services goes on increasing: the result is that existing staff carry a greater weight of both work and frustration in increasing proportion, until eventually a breaking point is reached and the vicious circle is given another turn, resulting in further inadequacies in the service concerned—

DR T. H. PARKMAN, *MOH, Hastings Annual Report 1965.*

The announcement that Dr Kerr, of Grimsby, had died during his early fifties, synchronising with the publication of obituary notices about the late Dr Cuthbert, of Dundee, who also died at the same age, inevitably directs the minds of medical officers of health to the excessive mortality that has occurred in their own profession in recent years. Both England and Scotland have been affected (and probably Wales too), but it is perhaps easier to study events in the smaller country. In Scotland there are thirty-one administrative counties and twenty-four large burghs, but, owing to combined appointments in a few cases, there are exactly fifty medical officers of health. In the last three years no fewer than four Scottish medical officers of health have died in office—Dr Johnstone, of Greenock; Dr Fraser, of Kirkcudbrightshire; Dr Walker, of Banffshire; and Dr Cuthbert, of Dundee; and a fifth, Dr Adam, of Roxburghshire, died a few weeks after his retirement. Five out of fifty in a period of three years is a proportion too high to be due to mere chance, especially as in the same triennium two of the other forty-five retired early on grounds of ill-health, while at least four of the remainder have had prolonged absences through illness.

A picture of this nature would be alarming in any occupational group but is, for various reasons, particularly disquieting in our own profession. The process of selection so operates that the entrant to the public health service should be considerably healthier than the majority of persons of comparable age: a physical weakling seldom embarks on the rigorous discipline of a medical curriculum; and only a doctor who is reasonably fit normally returns to his university to take a postgraduate diploma in public health—a course so heavy that it must be argued that it should be extended from one to two academic years of full-time study. Moreover, the would-be entrant to the local authority health service, after having given a practical demonstration of his physical stamina by surviving the ordeal of an overcrowded D.P.H. course, has to pass a medical examination for superannuation purposes, and is likely, in his thirties and early forties, to be subjected to other superannuation examinations as he moves from job to job. In addition, a doctor among all educated men, and a health officer among all doctors, should know how to maintain personal health and physical fitness.

One might expect *a priori* that local authority doctors would be healthier and have a longer expectation of life than either doctors in general or average members of the community; but in fact the reverse appears to be the case. The explanation of this excessive mortality among health officers is only too obvious: shortage of staff and increasing duties have combined to create a situation in which the average medical officer of health is grossly overworked. All too often the health officer is striving—for the benefit of the community—to maintain an efficient service with a skeleton staff, to the detriment of his own health and that of his colleagues.

Editorial 'The Medical Officer' 14 March 1953

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DEPARTMENT OF PUBLIC HEALTH
KETT HOUSE
STATION ROAD
CAMBRIDGE
Telephone Cambridge 58977

September, 1967

To the Mayor, Aldermen and Councillors of the City of Cambridge

MR MAYOR, LADIES AND GENTLEMEN,

This year saw the combination of the Public Health and Welfare Services committees as a single Public Health and Welfare committee. Of course, a number of committees are concerned with the work of this department: the Committee for Education in respect of the School Health Service, and the Housing, Property, Finance and Establishment committees also. The combination of health and welfare, however, means that one committee predominates and is concerned with the great bulk of the work of the department and this is a great convenience in making reports, considering estimates and other matters of this kind.

Innovations in the staff of the department were the appointment of an Area Dental Officer and orthodontic specialist in the School Dental Service and the appointment of meat inspectors to take over, very largely, this onerous and time-consuming work from the public health inspectors. In each sphere the new appointments have been worth while and have resulted in better and more efficient services. This year also saw the appointment of the first woman public health inspector which Cambridge has had.

The dental clinic at Milton Road school has always been a makeshift concern, operating inadequately in a single room. It was closed in May when reconstruction of the school took place and has been replaced by a purpose-built clinic on the Arbury Estate to which reference will be made in the report for next year.

The Welfare Foods office in Petty Cury was also closed this year. We had operated it on behalf of the County Council since the delegation of welfare services to the City but it was a very uneconomical proposition

latterly as there had to be a minimal staff of two people and the public were making very little use of the office. The distribution of welfare foods has always gone on through clinics as well and these cope quite adequately with the demand.

The City and County Councils have agreed to the adjustment of fluoride in the water supply but technical difficulties have still to be solved by the Water Company.

I have the honour to be,

Mr Mayor, Ladies and Gentlemen,

Your obedient servant,

CYRIL G. EASTWOOD,

*Medical Officer of Health and
Principal School Medical Officer*

Part I

ORGANIZATION

AND ADMINISTRATION

SECTION 1. THE COMMITTEES MOST CONCERNED WITH THE WORK OF THE DEPARTMENT

PUBLIC HEALTH AND WELFARE COMMITTEE (1966-67)

Chairman COUNCILLOR DR OAKDEN

ALDERMAN RIDGEON
(*Vice-Chairman*)
COUNCILLOR MRS KALDOR
COUNCILLOR BERRILL

COUNCILLOR MRS BURN
COUNCILLOR GARNER
COUNCILLOR STEELE

COMMITTEE FOR EDUCATION (1966-67)

Chairman ALDERMAN AMEY

THE MAYOR
ALDERMAN HICKSON
ALDERMAN RIDGEON
(*Vice-Chairman*)
COUNCILLOR MISS CANE
COUNCILLOR CROSSMAN
COUNCILLOR MRS CULVERWELL
COUNCILLOR CUNINGHAM
COUNCILLOR MRS DAVID
COUNCILLOR DEAN
COUNCILLOR DIXON
COUNCILLOR MRS HENN
COUNCILLOR MISS HOWLETT

COUNCILLOR MRS KALDOR
COUNCILLOR MRS KNOWLSON
COUNCILLOR MRS MORSE
THE VEN. M. CAREY
MR C. GENT
MRS G. HICKSON
MISS D. A. HUMPHREYS
MR B. JACKSON
MRS D. M. WATERS
COUNTY ALDERMAN MRS HEPHER
COUNTY ALDERMAN MRS PARSONS
COUNTY ALDERMAN MRS PAYNE

Primary Education and Special Services Sub-Committee (1966-67)

Chairman COUNCILLOR DEAN

THE MAYOR
ALDERMAN AMEY
COUNCILLOR MRS CULVERWELL
COUNCILLOR MRS HENN
COUNCILLOR MRS KNOWLSON
THE VEN. M. CAREY
MR C. GENT

MRS G. HICKSON
MISS D. A. HUMPHREYS
MR B. JACKSON
MRS D. M. WATERS
COUNTY ALDERMAN MRS HEPHER
COUNTY ALDERMAN MRS PAYNE

Special Schools Sub-Committee (1966-67)

Chairman ALDERMAN AMEY

THE MAYOR
COUNCILLOR MRS CULVERWELL
COUNCILLOR DEAN
COUNCILLOR MRS HENN
COUNCILLOR MRS KNOWLSON
THE VEN. M. CAREY
MR C. GENT

MRS G. HICKSON
MR B. JACKSON
MISS D. A. HUMPHREYS
MRS D. WATERS
COUNTY ALDERMAN MRS HEPHER
COUNTY ALDERMAN MRS PAYNE

HOUSING COMMITTEE (1966–67)

Chairman COUNCILLOR FINBOW

ALDERMAN WORDINGHAM

COUNCILLOR MRS BURN

COUNCILLOR MRS HENN

COUNCILLOR DR MAITLAND

(Vice-Chairman)

COUNCILLOR DR OAKDEN

COUNCILLOR REILLY

SECTION 2. STAFF AND ORGANIZATION OF THE DEPARTMENT

STAFF OF THE DEPARTMENT

Medical Officer of Health and Principal School Medical Officer

CYRIL G. EASTWOOD, M.D., CH.B., B.Sc., M.R.C.S., L.R.C.P., D.P.H.,
F.R.S.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer

MARGARET C. K. PATTERSON, M.B., CH.B., D.P.H., D.O. (OXON.)

Principal School Dental Officer

J. R. TOLLER, M.D.S., L.D.S.

Chief Public Health Inspector

J. F. EDWARDS ^{1 2 3 4}

Deputy Chief Public Health Inspector

R. BURFIELD ^{1 2 4}

Chief Administrative Assistant

R. J. MITTON, M.R.I.P.H.H., A.R.S.H.

Superintendent Nursing Officer

Miss I. M. WORSFOLD, S.R.N., S.C.M., H.V.Cert., (*Ranyard Nurse*)

Deputy Superintendent Nursing Officer

Miss M. LIVESEY, S.R.N., S.C.M., H.V.Cert., (*Queen's Nurse*)

Home Help Organiser

Mrs M. L. COOPER

Assistant Home Help Organiser

Miss C. M. GIBSON

Matron of Sedley Nursery

Mrs E. E. CALLOW, S.R.N., R.S.C.N.

¹ Certificate of the Royal Society of Health and Sanitary Inspectors' Joint Board

² Meat and Foods Certificate of the Royal Society of Health

³ Certificate in Sanitary Science of the Royal Society of Health

⁴ Certificate in Smoke Inspection of the Royal Society of Health

Other Staff

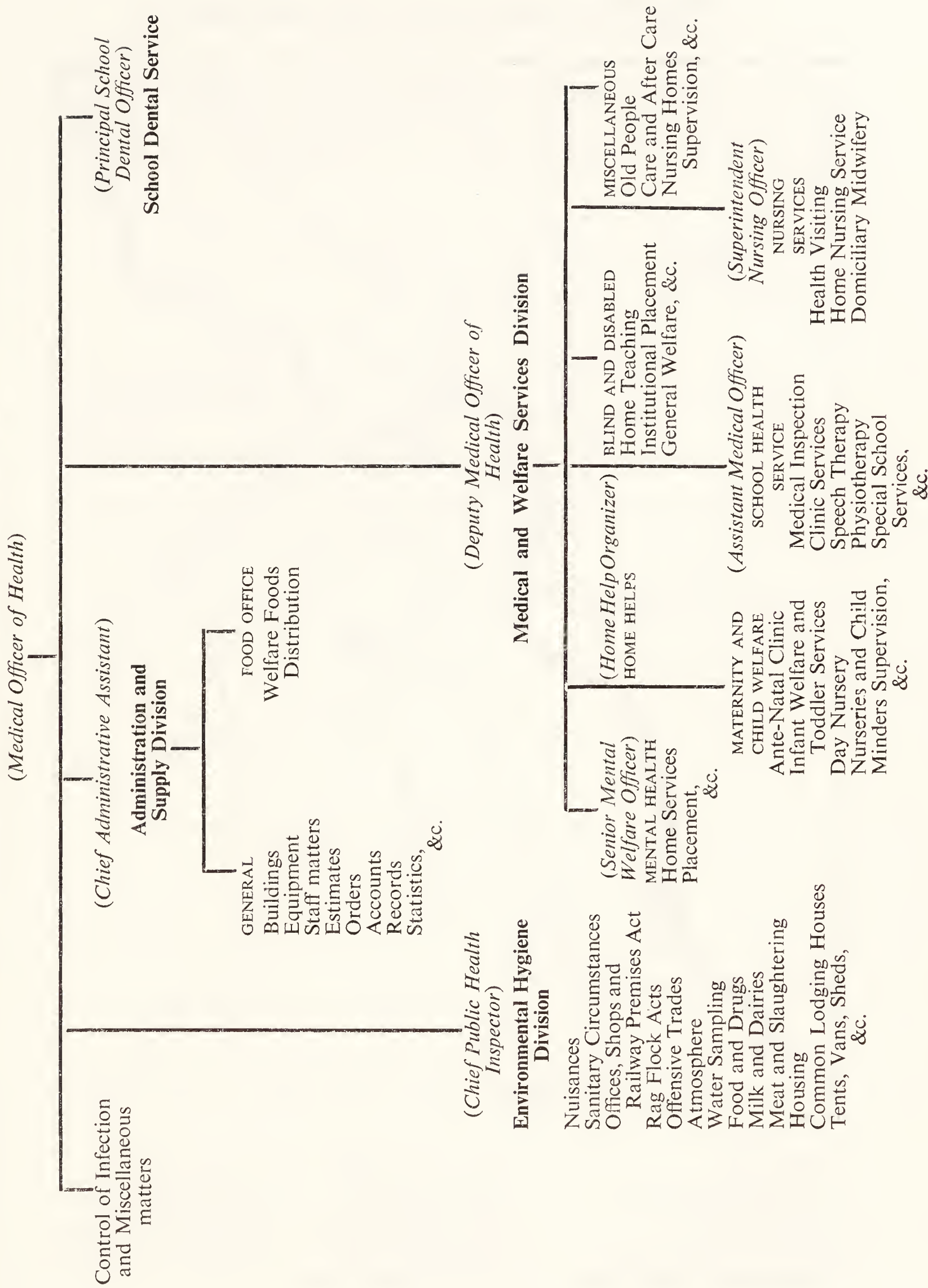
<i>Posts</i>	<i>Establishment</i>		<i>Posts Filled</i>		<i>Notes</i>
	<i>Full time</i>	<i>Part time</i>	<i>Full time</i>	<i>Part time</i>	
Assistant Medical Officers	2	2	2	2	
Medical and Surgical Consultants ..	—	3	—	3	
Anaesthetist	—	1	—	1	
Dental Officers	5	—	3	—	
Dental Auxiliaries	2	—	2	—	
Public Health Inspectors	9	—	9	—	
Pupil Inspectors	4	—	3	—	
Meat Inspectors	3	—	3	—	
Health Visitors and School Nurses ..	16	1	9	1	2 <i>Queen's Nurses</i>
District Nurses	15	—	14	1	3 <i>Queen's Nurses</i>
Midwives	11	—	7	1	
Mental Welfare Officers	3	—	3	—	
Physiotherapists	3	1	3	1	
Speech Therapists	—	5	—	2	
Orthoptist	—	1	—	1	
Audiometrician	—	1	—	1	
Home Teacher/Welfare Officers ..	4	—	4	—	
Nursery Staff: Deputy Matron, Warden, Nursery Nurses and Assistants	5	—	5	—	
Dental Technician	1	—	1	—	
Dental Surgery Assistants	6	1	3	1	
Administrative and clerical	22	—	21	3	
Sanitary	5	—	5	—	
Domestic	3	—	3	—	
Home Helps	90	—	30	91	<i>equivalent to 75 full time</i>

Among the nursing, inspectorial, medical-auxiliary, administrative and clerical groups of the staff there were resignations and new appointments too numerous to particularise. For the most part resignations are caused by the securing of higher posts elsewhere and, in the case of women, by marriage and removal from Cambridge. New appointments then become necessary as replacements.

Mr Butler, our consultant orthopaedic surgeon for the Cerebral Palsy Unit, retired during the year. Mr A. H. G. Murley, of Addenbrooke's Hospital, took his place.

As we share our Principal School Dental officer with the County, a new post of Area Dental Officer for the City was created. Mr A. B. Hewitt, who was appointed to this post, is specially qualified and experienced in orthodontics and was designated orthodontist as well.

Under the scheme of delegation of Welfare Services we have an establishment of three Mental Welfare Officers. In practice, one has to act as senior and this was recognised, this year, by the formal designation of a senior post.



PREMISES USED BY THE DEPARTMENT



- | | | |
|-----------------------------|--------------------------|------------------------|
| 1 Kett House | 6 Arbury Road Clinic | 11 Newnham Clinic |
| 2 Auckland Road Clinic | 7 Chesterton Clinic | 12 Trumpington Clinic |
| 3 Romsey Clinic | 8 East Barnwell Clinic | 13 Lady Adrian School |
| 4 Cherry Hinton Clinic | 9 Castle Street Clinic | 14 Roger Ascham School |
| 5 Milton Road Dental Clinic | 10 Norwich Street Clinic | |

THE COST OF THE DEPARTMENTAL SERVICES

This Report deals with the calendar year 1966 but the Council’s financial year runs from April to the following March. Because of this, it is difficult to give the cost of the various services for the period under review but the following figures (for the financial year ended March 31st 1967) are reasonably relevant.

<i>Service</i>	<i>Net expenditure £</i>	<i>Net expenditure per head of population £ s. d.</i>			<i>Net expenditure per head per week (pence)</i>
Environmental health	43208	8	8		2.00
School Health Service	34458	6	11		1.60
Other Welfare Services	143965	1	8	10	6.56

Note: The population used is the Registrar General’s estimated population in June 1966 (99,830).

Part II

**GENERAL STATISTICS
OF HEALTH AND
DISEASE**

SECTION 1. STATISTICAL SUMMARIES

STATISTICAL SUMMARY FROM 1875

	1875	1880	1890	1900	1910	1920	1930	1940	1950	1960	1961	1962	1963	1964	1965	1966
Population ..	30078	35000	41070	38607	40509	60154	60730	79140	90470	93840	94810	95380	96020	98390	99270	99830
Marriages	307	563	449	728	672	722	758	752	776	787
Marriage Rate	15.1	18.7	14.7	15.5	14.1	15.1	15.7	15.2	15.6	15.7
1. Live Births ..	881	1040	934	923	799	1219	761	893	1322	1418	1448	1442	1478	1588	1494	1421
Live Birth Rate ..	29.3	29.7	22.7	23.9	19.7	20.2	12.5	11.3	14.6	15.1	15.2	15.1	15.3	16.1	15.0	14.2
Still Births ..	59	26	28	44	16	33	18.	16	23	23	17	14	25
Still Birth Rate ..	94.7	31.5	22.4	54.6	17.6	24.3	12.5	10.9	15.6	15.5	10.5	9.2	17.2
Total Births ..	940	825	1247	805	909	1355	1436	1464	1465	1501	1605	1508	1446
Total Deaths ..	532	606	656	604	513	568	680	949	885	917	1023	958	984	950	880	955
1. Death Rate ..	17.7	17.3	15.9	15.9	12.6	9.4	11.3	11.9	9.7	9.7	10.7	10.0	10.2	9.6	8.8	9.5
2. Infant Mortality	168	134	122	61	50	31	34	26	26	22	22	23	18	25	16
I.M. Rate	161	143	132	76	41	40	38	19.6	18.3	15.1	15.2	15.5	11.3	16.7	11.2
Legitimate I.M. Rate	9.5	..	36	35	18.4	17.9	15.3	15.5	15.3	10.8	16.7	12.2
Illegitimate I.M. Rate	41.0	24.0	12.6	10.6	18.6	18.1	16.8	..
3. Neonatal Mortality	95.2	16	16	19	18	16	19	9
N.M. Rate	11.2	11.0	13.1	12.1	10.0	13.4	63
4. Illegitimate Live Birth Rate	5.3	5.1	4.4	..	5.5	5.8	5.4	6.5	7.2	6.9	7.9	8.2
Maternal Deaths	4	3	0	..	1
Maternal Mortality Rate	4.9	3.3	0	..	0.6

The records began in 1875 but, as they are incomplete, some of the figures for earlier years are approximations

For explanation of the various rates see the Statistical Summary for 1966

1. Uncorrected.

2. Deaths under 1 year.
3. Deaths under 4 weeks.

4. Illegitimate births **per cent.** of total live births.

STATISTICAL SUMMARY, 1966

Area (acres)	10,057
Population: Census, 1961	95,358
Registrar-General's estimate at June 30th, 1966	99,830
(including 10,213 University Population)		
Number of persons per acre	9.9
Number of Inhabited Houses	30,295
Average number of persons per house	3.29
Estimated Rateable Value	£5,619,820
Estimated Sum represented by a penny rate	£22,730

Marriages

Number of Marriages	Total	787
Marriage rate (number of persons marrying per 1,000 population)			15.7

Births

Live Births	{ Legitimate 1,304 (651 males, 653 females) Illegitimate 117 (66 males, 51 females) }	Total	1,421
Live Birth rate (number of births per 1,000 population)		14.2
Live Birth rate corrected by comparability factor (0.96)		13.6*
Illegitimate live births per cent of total live births		8.2
Still Births	{ Legitimate 24 (13 males, 11 females) Illegitimate (1 female) }	Total	25
Still Birth rate (number of still births per 1,000 total births)		17.2
Total Live and Still births.		1,446

Deaths

466 males, 489 females	Total	955
Death rate (number of deaths per 1,000 population)		9.5
Death rate corrected by comparability factor (1.06)		9.9*
Infants deaths under 1 year	{ Legitimate 16 Illegitimate - }	Total	16
Total infant mortality rate (deaths under 1 year per 1,000 live births)		11.2
Legitimate infant mortality rate (legitimate deaths under 1 year per 1,000 legitimate live births)		12.2
Illegitimate infant mortality rate (illegitimate deaths under 1 year per 1,000 illegitimate live births)		—
Neonatal mortality (deaths in first 4 weeks)	{ Legitimate 9 Illegitimate - }	Total	9
Neonatal mortality rate (deaths in first 4 weeks per 1,000 live births)		6.3
Early neonatal mortality (deaths in 1st week)		7
Early neonatal mortality rate (deaths in 1st week per 1,000 live births)		22.1
Perinatal mortality (combined still-births and deaths in 1st week)		32
Perinatal mortality rate (combined still-births and deaths in 1st week per 1,000 live and still-births)		22.1
Maternal deaths (including abortion)		—
Maternal mortality rate (maternal deaths per 1,000 live and still births)		—

*See page 19 for explanation of Comparability Factor

SECTION 2. VITAL AND MORTAL STATISTICS

POPULATION

The Registrar-General's estimate of the population of the City on June 30th 1966 was 99,830. This includes 10,213 members of the University. In 1965, the estimated total was 99,270 and the number of members of the University was 9,580.

Natural Increase of the Population The following figures show the natural increase or the excess of births over deaths since 1875:

Year	Population ¹	Live Births	Deaths	Natural Increase	Increase per cent ²
1875	30078	881	532	349	—
1900	38607	923	604	319	0.30
1925	59020	838	609	229	0.90
1950	90470	1322	885	437	2.08
1960	93840	1418	917	501	1.31
1961	94810	1448	1023	425	0.76
1962	95380	1442	958	484	0.50
1963	96020	1478	984	494	0.10
1964	98390	1588	950	638	1.44
1965	99270	1494	880	614	0.24
1966	99830 98830	1421	955	466	1.48

¹=Mid year estimate



²=Increase per cent over previous year

MARRIAGES

There were 787 marriages of Cambridge people during 1966. The number of people marrying was, thus, 1,574, which gives a marriage rate (number of persons marrying per 1,000 of the population) of 15.7.

BIRTHS

The following table gives particulars of the city births for 1966:

	Live Births		Still Births	
	Legit- imate	Illegit- imate	Legit- imate	Illegit- imate
Males	651	66	13	—
Females	653	51	11	1
	<hr/> 1304	<hr/> 117	<hr/> 24	<hr/> 1
	<hr/> 		<hr/> 	
TOTAL	1421		25	
Number of males born per 100 females	101			
Birth rates	14.2		17.2	
Live birth rate corrected by comparability factor (0.96)	13.6		—	

1541 children were born in Cambridge to parents not resident in the city. These are registered in the usual way, but are not included in the above table. 54 children, whose parents are Cambridge residents, were born outside the city, and these are included in the table.

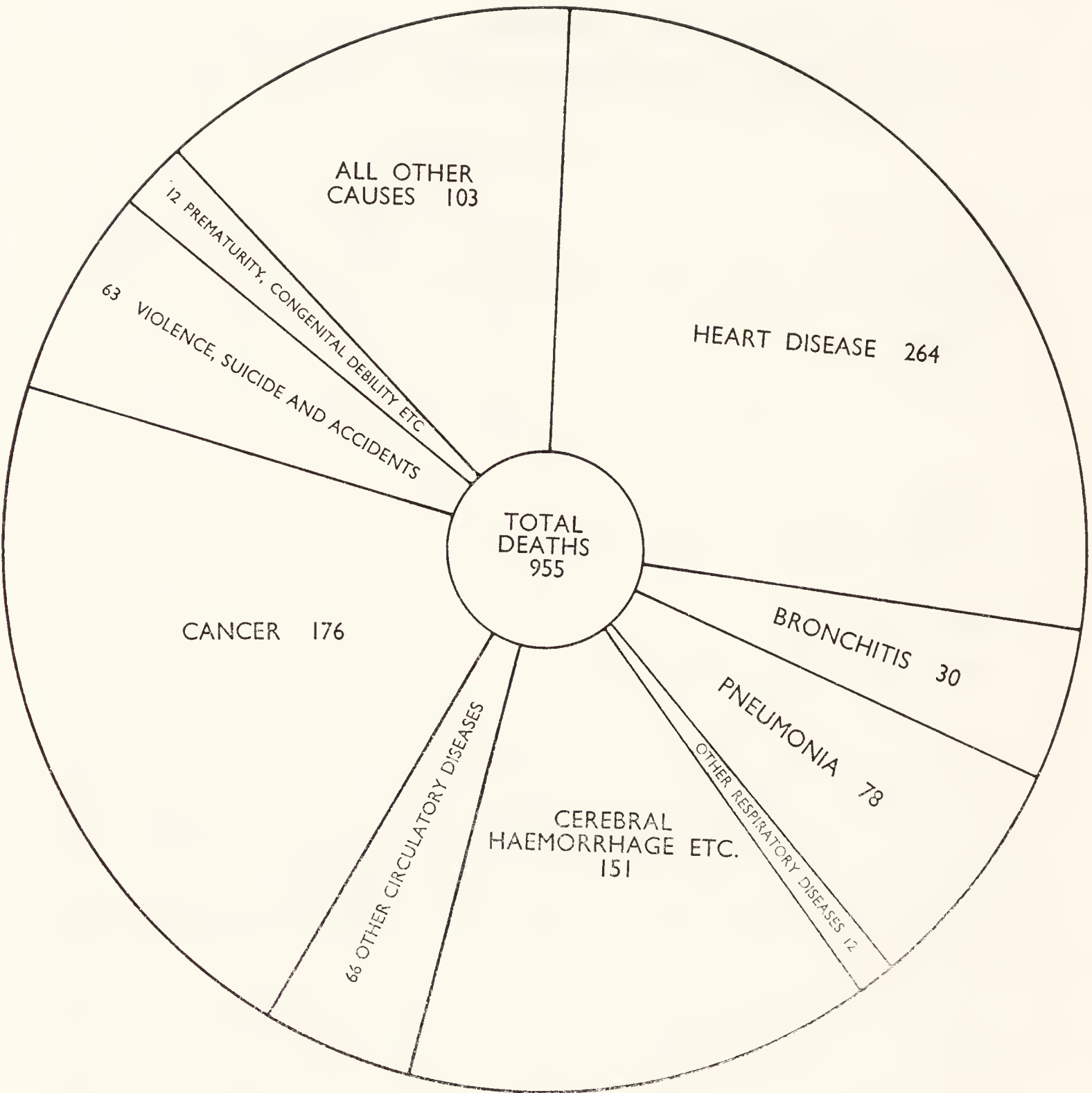
The crude live birth rate was 14.2 births per 1,000 population. The rate for England and Wales is 17.7 and the average Cambridge rate for the last ten years is 14.8.

Comparison between our birth rate and that of other towns is complicated by the fact that all towns do not have a population of the same composition. Some places attract a larger number of retired people, and so the birth rate may seem unduly low. New industrial areas may have a high proportion of young married people with a correspondingly high birth rate. The Registrar-General, therefore, calculates a comparability factor and, when this is applied to the crude birth rate, the resulting figure is what the birth rate would be if Cambridge had a theoretical standard population. When all birth rates are based upon this same standard population, comparison of one with another becomes possible and useful.

Births in Institutions The proportion of infants born in Nursing Homes and Hospitals was 59.5 per cent of the total births, a decrease of 2.7 per cent as compared with the preceding year.

The following is a summary of institutional births belonging to Cambridge:

	<i>Births</i>	<i>Percentage of total Births</i>
Private Nursing Homes	90	6.2
Maternity Hospital	771	53.3



Deaths in Public Institutions During the year there were 535 deaths of Cambridge residents in Public Institutions and Nursing Homes. This is 55.8 per cent of the total number of deaths. Last year the percentage was 59.1.

Institution				Number of Deaths	Per cent of total Deaths
Addenbrooke's Hospital	258	27.0
Maternity Hospital, Mill Road	6	.6
Chesterton Hospital	163	17.0
Brookfields Hospital	13	1.3
Private Nursing Homes	26	2.7
Other Institutions	69	7.2
Total				535	55.8

DEATHS

The number of deaths recorded was 955 (466 males, 489 females) an increase of 75 compared with 1965. Cambridge residents who died away from the city are included in these figures. Strangers who died while in Cambridge are excluded.

The crude death rate was 9.5 per 1,000 of the population. The rate for England and Wales was 11.7.

As in the case of the birth rate, correction of the death rate by a comparability factor is statistically desirable. The factor in this case is 1.05 and the corrected death rate is 9.9.

Causes and Ages of Death during the Year 1966

<i>Causes of Death</i>			<i>All Ages</i>	<i>Under 1 Year</i>	<i>1-24</i>	<i>25-44</i>	<i>45-64</i>	<i>65 and upwards</i>
Tuberculosis of Respiratory System			2	—	—	—	2	—
Cancer:								
Lungs and Bronchus ..			56	—	—	—	33	23
Other			120	—	—	3	32	85
Leukaemia			8	—	1	1	1	5
Diabetes			2	—	—	—	1	1
Vascular Lesions of Nervous System			151	—	—	7	19	125
Heart Disease			264	—	—	3	65	196
Other Circulatory Diseases ..			66	—	—	—	5	61
Pneumonia			78	—	2	1	2	73
Bronchitis			30	1	—	—	7	22
Other Diseases of Respiratory System			12	—	—	—	2	10
Ulcer of Stomach and Duodenum			6	—	—	—	—	6
Nephritis			4	—	—	—	1	2
Hyperplasia of Prostate ..			2	—	—	—	—	2
Congenital Malformations ..			8	5	2	1	—	—
Other Defined and Ill-defined Diseases			83	10	3	4	21	45
Motor Vehicle Accidents ..			16	—	8	2	—	6
All Other Accidents			30	—	1	2	9	18
Suicide			17	—	3	2	6	6
Totals ..			955	16	21	26	206	686
<hr/>								
<i>Analysis of Accidental Deaths</i>	Road Accidents							16
	Consequent upon a fall							20
	Barbiturate poisoning							4
	Coal gas poisoning							5
	Electrocution							1
								<hr/> 46
<hr/>								
<i>Analysis of Suicides</i>	Coal gas poisoning							7
	Barbiturate poisoning							1
	Fractured Skull							1
	Asphyxia							1
	Aspirin Poisoning							1
	Paraffin Poisoning							1
	Gunshot Wounds							1
	Drowning							3
	Burns							1
								<hr/> 17

Maternal Mortality There were no deaths during the year.

The number of deaths of mothers from sepsis, and from other puerperal conditions for the past ten years was 0 from sepsis and 1 from all other conditions.

The death rate from puerperal sepsis for the same period has been *nil*, and from other puerperal conditions 0.0006 per 1,000 births.

Infant Mortality By infant mortality is meant the number of deaths of infants under 1 year of age. This was 16 in 1966.

The Infant Mortality rate is the number of deaths under 1 year per 1,000 live births. The rate was 11.2 in 1966. The rate for England and Wales was 19.0.

The Infant Mortality rate is a delicate index of the general healthiness of a community, since infants have a more tenuous grasp of life than older persons, and so tend to be more readily killed by disease and by poor environment. The following table shows the decline in the infant mortality rate during this century.

Year	No. of Infant Deaths	Infant Mortality Rate*	Percentage of total deaths at all ages	Infant Mortality rate for England and Wales*
1900	128	132	21.9	154
1910	61	76	12.0	105
1920	50	41	8.8	80
1930	31	40	4.6	60
1940	34	38	3.6	55
1950	26	20	2.9	30
1960	26	18	2.8	21
1961	22	15	1.4	21
1962	22	15	2.2	21
1963	23	15	2.3	20
1964	18	11	1.8	20
1965	25	17	2.8	20
1966	16	11	1.6	19

**These figures are rounded off to the nearest whole number and so may not quite agree with statements elsewhere in this Report*

Net Deaths from Stated Causes at Various Ages under 1 Year

<i>Causes of Death</i>	<i>Under 1 week</i>	<i>1-2 weeks</i>	<i>2-3 weeks</i>	<i>3-4 weeks</i>	<i>Total under 1 month</i>	<i>1-3 months</i>	<i>3-6 months</i>	<i>6-9 months</i>	<i>9-12 months</i>	<i>Total deaths under 1 year</i>
Neo-Natal Asphyxia	1	—	—	—	1	—	—	—	—	1
Congenital Heart Disease and Malformations	2	—	1	—	3	—	—	2	—	5
Premature Birth	2	—	—	—	2	—	—	—	—	2
Pneumonia	1	—	—	—	1	—	—	1	—	2
Other Causes	1	1	—	—	2	1	—	2	1	6
Totals ..	7	1	1	—	9	1	—	5	1	16

Neo-natal Mortality The decline in infant deaths shows that they are preventable in great measure, but there is a ‘hard core’ due to causes which are, probably, irremovable. Various kinds of congenital abnormality and prematurity of birth are examples of such causes of death. These causes operate very early in life, in the first week or fortnight as a rule. It will be seen from the preceding table that 9 out of the 16 infant deaths occurred in the first month, and this may be expressed as a neo-natal mortality rate of 6·3 (deaths under 4 weeks per 1,000 live births).

SECTION 3. THE INCIDENCE AND CONTROL OF DISEASE

INFECTIOUS DISEASES NOTIFICATIONS RECEIVED DURING THE YEAR

	<i>Under 1 year</i>	<i>1-2 years</i>	<i>3-4 years</i>	<i>5-9 years</i>	<i>10-14 years</i>	<i>15-24 years</i>	<i>25-44 years</i>	<i>45-64 years</i>	<i>65 yrs over</i>	<i>Age un- known</i>	<i>Total</i>
Scarlet Fever	-	2	5	13	-	-	-	-	-	1	21
Puerperal Pyrexia	-	-	-	-	-	-	1	-	-	-	1
Pneumonia	-	-	-	1	-	-	-	-	1	-	2
Erysipelas	-	-	-	-	-	-	-	1	-	-	1
Dysentery	11	67	122	273	32	34	92	8	4	28	671
Measles	13	117	154	105	6	4	2	-	1	9	411
Infective Hepatitis	-	1	1	6	12	14	19	2	-	4	59
Tuberculosis:											
<i>Respiratory</i>	-	-	-	1	-	3	2	6	4	-	16
<i>Non-Respiratory</i>	-	-	1	-	-	-	2	-	-	-	3
Whooping Cough	-	3	1	1	-	-	-	-	-	-	5
Enteric Fever:											
<i>Typhoid Fever</i>	-	-	-	-	-	1	-	-	-	-	1
<i>Paratyphoid Fever</i>	-	-	-	-	-	1	-	-	-	-	1

Dysentery Cases of dysentery were notified almost throughout the year but the number shown in the table above gives an exaggerated impression of the extent of this disease. Many people were not actually ill but were discovered to be excreting dysentery organisms when specimens were taken from them because of a case in the family. The number actually ill was, therefore, smaller than the 671 cases shown and in no instance was the disease at all serious. Nevertheless it involved the expenditure of a great deal of time and trouble in making sure that the food supply of the City did not become involved as this might have had really serious repercussions. That this did not occur is due to the exertions of my staff and the Public Health Laboratory and it is due also to the co-operation of, and great care taken by, infected people. The origin of the outbreak could not be established nor was it always possible to see how the later cases became infected as there was often no evidence of contact, even remote, between one infected person and the next.

Enteric Fever The case of typhoid fever was a Persian, on a visit to England. She was ill when she arrived. The case of paratyphoid fever was mild. It was originally thought to be food poisoning, but the source of infection could not be found.

Tuberculosis The number of cases notified during the year was 19. The respiratory cases numbered 16 and the non-respiratory 3. Three tuberculous patients died during the year.

The number of cases of tuberculosis on the register at the end of 1966 was 216, of whom 135 were males and 81 females. The respiratory cases numbered 170 (115 males and 55 females) and the non-respiratory 46 (20 males and 26 females). Provision of treatment is a responsibility of the Regional Hospital Board.

During the year B.C.G. Vaccination was continued in schools in the City. This vaccination gives resistance to tuberculosis in a way similar to other inoculations, i.e. immunisation against diphtheria, whooping cough and poliomyelitis.

I give hereunder a table showing the number of children tested, found to be negative and vaccinated and also the number of children who showed a certain immunity to the disease:

<i>No. who accepted Skin Test and Vaccination</i>	<i>No. who accepted Skin Test only</i>	<i>No. skin Tested</i>	<i>Number Positive</i>	<i>Number Negative</i>	<i>Number Vaccinated</i>
1436	—	1337	213	1055	1043

The Mass Radiography Unit of the Regional Hospital Board continued to offer facilities for the examination of Cambridge citizens during the year.

VACCINATION AND IMMUNIZATION*

Smallpox During the year 1039 persons were vaccinated in the City.

Diphtheria During the year 1342 children were immunised against Diphtheria and 2461 were given a reinforcing injection following earlier immunisation.

Whooping Cough 1308 children were immunised against Whooping Cough, many of these at the same time as Diphtheria immunisation.

Poliomyelitis 1686 children completed a course of immunisation during the year. 1407 children were given a booster injection.

**See page 65 for the numbers done at our own clinics.*

INVESTIGATION AND DISINFECTION

1560 visits were made to houses, schools, hospitals and places of work, investigating infectious diseases. This was additional to visits by medical officers and nursing staff (for which see Part IV of this Report.)

During the year 18 disinfections of premises were carried out. We also assist the police from time to time and have an arrangement with the public libraries for preventing the spread of infection through books. 5 parcels of gift clothing for overseas were disinfected here in compliance with government requirements.

After receipt of circulars from the Minister of Health machinery was established to ensure that as far as is possible every immigrant is visited soon after arrival. Arrangements are then made for registration with a general practitioner and for chest X-ray photographs. The system has worked well so far and during the year public health inspectors paid 153 visits.

Part III
ENVIRONMENTAL
HYGIENE

SECTION 1. NATURAL AND SOCIAL CONDITIONS

TOPOGRAPHY

The City is situated in latitude 52° 12' N. and longitude 0° 7' E., about fifty miles north of London, on the midland side of East Anglia and in the southern part of the Fen District. The City is shaped like a very rough rectangle, about five miles from north to south and four miles from east to west. It is very low lying, the greater part being between 25 and 50 feet above sea level. In three places (near the railway station, at Trumpington and near Madingley) the ground rises above 50 feet and, on the boundary near to Girton, somewhat exceeds 75 feet. The only really high ground within the City boundary is at what may be termed the south eastern 'corner' where, at the beginning of the Roman road and exactly on the City boundary, a height of 225 feet is reached.

The City stands upon clay but this is overlain by gravel in a broad belt extending roughly from south-west to north-east. Through the middle, along this line, flows the River Cam which is the main means of drainage of the City. The river enters the City at the south-west, close to the 25 foot contour and leaves at the north-eastern extremity where the boundary is a little below 25 feet. The water is analysed periodically.

CLIMATE

As part of Great Britain, Cambridge shares in the insular climate but, since it is in a comparatively flat part of the country and facing the continent, it also shares to some extent in the Continental type of climate and falls somewhere between the truly insular and the truly continental. The prevailing winds come from the south-west and the rainfall is low relative to the rest of the country. There is an average of about 21 inches a year, with the greatest fall in October as a rule, and the least rain in February, although the actual number of rainy days is about the same in each of these extreme months.

The hours of sunshine amount to almost 7 per day in the middle of June and fall to less than 2 per day in December, averaging somewhat over 4 for the whole year. The relative humidity is, on the average, about 80, being at a maximum in December and January and a minimum about June.

The following list summarises the principal meteorological observations of 1966 (the figures in brackets are the averages for the past ten years):

Rainfall:

Total 23.62 inches	..	(22.03)
Number of days with rain	..	160	..	(157)
Days with 0.04 inches or more	..	120	..	(108)
Days with less than 0.04 inches	..	40	..	(49)
Heaviest fall in 24 hours	1.17 inches	(22nd Aug.)	(1.24)

Temperature:

Highest temperature in screen ..	80.9°F. (21st Aug.) ..	(84°)
Lowest temperature in screen ..	10.9°F. (19th Jan.) ..	(14°)
Lowest grass temperature ..	8.0°F. (19th Jan.) ..	(8°)
Number of frosts (<i>i.e.</i> , 32° F. and below) in screen	54 ..	(54)
Number of ground frosts (<i>i.e.</i> , 30° F. or below on grass) ..	82 ..	(102)

Miscellaneous:

Hours of bright sunshine ..	1301	(not available)
Days with fog	14 ..	(15)
Days with thunder	3 ..	(10)
Days with snow	10 ..	(17)

INDUSTRIES AND COMMUNICATIONS

The University may be regarded as the oldest and one of the most important ‘industries’ of the City and, apart from its members, employs directly and indirectly a considerable number of people. The University Press may also be considered one of the city’s principal industries. Other important trades and manufacturers are the production of radio and television equipment, scientific instruments, dairy equipment, cement and asphalt. Flour milling is carried on, and there are some other, smaller, industrial activities.

The city is well served by roads and railways, and there is an airport for private aviation immediately outside the boundary.

SECTION 2. THE ATMOSPHERE

ATMOSPHERIC POLLUTION

Smoke Control Orders In 1964 the City Council approved a programme whereby the City was to be covered by 20 Smoke Control Orders, which forbid the emission of smoke from chimneys. Smoke Control Order No. 2, which would have made most of the central area smokeless, was confirmed on 5th May 1966 to become operative on 1st March 1967.

The Order never became operative. The financial crisis of 1966 led to restrictions on local government expenditure and the City Council decided to economise by postponing the date of operation, first until September 1967 and then until September 1968.

The National Survey of Atmospheric Pollution For many years the standard method of measuring atmospheric pollution was by exposing a candle of gauze containing lead dioxide and by using large collecting bowls. The candles were analysed monthly and a chemist was able to say approximately what quantity of sulphur dioxide had fallen on the candle, which later could be expressed in terms of milligrams per 100 square centimetres. Also monthly the amount of soluble and insoluble matter falling into the deposit gauge could be weighed and this sort of pollution expressed in tons per square mile.

The Department of Scientific and Industrial Research decided to institute a nation-wide survey extending over several years using improved instruments. By these volumetric gauges smoke and sulphur dioxide are shown, smoke on filter papers and sulphur dioxide by passing air through a standard hydrogen peroxide solution. All quantities are measured, daily readings are taken and sent monthly to Warren Spring Laboratory for analysis by computer. In this way a complete pattern of atmospheric pollution records has been established over the whole country. Although these gauges must be visited daily as against monthly for the old type gauges the cost is offset because analysis of the findings is free whereas formerly an analyst's fee was paid.

The true value of these readings will only be apparent when the Ministry of Technology has collated all the findings, but one instance illustrates their local value. We had noticed that figures for smoke were rising sharply in August and September of each year and for some time had wondered whether the practice of burning stubble in cornfields had any bearing on the high readings. As data became available we were able to establish no consistent relationship but at least a negative finding might, by a process of elimination, lead us to an unrevealed source of pollution.

As installation of the gauges was completed only during the latter half of 1966 there is no point in presenting a mass of figures but useful readings may be available for my next report. Three of these gauges are in operation at present.

Industrial Pollution 86 observations of chimneys were made and four offenders dealt with informally. Also 85 visits were made in connection with applications for prior approval of new boiler installations and related matters.

SECTION 3. WATER SUPPLIES

THE PUBLIC SUPPLY

The water supply of the City is provided by the Cambridge Water Company (whose area of supply includes the Rural Districts of Chesterton and South Cambridgeshire, the Borough of St Ives, the Urban District of Ramsey and the Rural District of St Ives) and is obtained from four deep wells sunk into chalk outcrop in the parishes of Fulbourn and Great Wilbraham some six miles East of the City, and Babraham, four miles South of the City.

The Fleam Dyke Well has a daily yield which varies seasonally between 3.0 and 3.6 million gallons. The well is 162 ft. deep and has a water-tight lining from top to bottom. The pumps are capable of delivery at the rate of 160,000 gallons an hour. The water as piped from the well is practically sterile. Although many thousands of samples have been examined *Bacterium Coli* has never once been found in 100 c.c. Despite this fact, a small precautionary dose of 0.08 p.p.m. of chlorine is administered.

The Fulbourn Well has a maximum yield of 2 million gallons a day. The well is 58 ft. deep. The chemical quality of the water is at all times excellent, but it is subject to slight intermittent bacterial pollution. Because of this the well water is given a substantial dose of chlorine (0.5 p.p.m.) followed by a contact period of half an hour before being dechlorinated and turned into supply. Bacteriological examinations (which are made at weekly intervals) have shown that this treatment invariably produces a sterile water.

The Great Wilbraham source comprises duplicate 14 in. diameter boreholes sunk to a depth of 180 ft., and united at a depth of 165 ft. Duplicate electrically driven submersible pumps each having a capacity of approximately 50,000 gallons per hour (1.2 million gallons a day) are installed but only one pump is operated at a time. Water from this source, the quality of which is as high as that from Fleam Dyke, is conveyed through two miles of 12 in. diameter main to Fleam Dyke where it blends with the Fleam Dyke water and receives the same token dose of chlorine.

The Babraham Source comprises duplicate 17 in. diameter lined boreholes sunk to a depth of 150 ft. and united at a depth of 126 ft. Duplicate electrically driven pumps, each with a capacity of about 85,000 gallons per hour (2 million gallons a day), are installed but only one pump is operated at a time. After chlorination and dechlorination the water is delivered into the distribution system via three miles of 18 ins. diameter trunk main. To protect the quality of the water at source the Company has constructed and operates a sewage disposal system serving two farms and 14 cottages in the vicinity of the well. The water is not softened and has a hardness of 320 p.p.m.

Water Softening. The water pumped from the Fleam Dyke, Fulbourn and Great Wilbraham Wells has a hardness of 250 p.p.m. At Cherry Hinton the trunk mains conveying the water to the city are tapped, and one half of the total flow is passed through a base-exchange softening plant in which the whole of the hardness is removed. Subsequently the hard and softened portions of the supply are blended so that the water passing into supply normally has a total hardness of 130 p.p.m. only.

Service Reservoirs. On high ground at the top of Lime Kiln Hill at Cherry Hinton there are three covered service reservoirs having a combined capacity of 8 million gallons. These are connected to the trunk mains from the four sources of supply and act as balancing tanks. Thus, when the demand exceeds the rate of pumping, the balance flows out of the reservoirs and, conversely, when the rate of pumping exceeds the demand the balance flows into the reservoirs. A further service reservoir at Coton has a capacity of 1 million gallons.

General. During 1966 the supply has been entirely satisfactory as regards quality and unrestricted supplies were maintained.

During the year, no samples of raw water were taken by my Department, that going into the supply was sampled twice for both chemical and bacteriological examinations. Prolonged tests made by the Water Pollution Research Board of the Department of Scientific and Industrial Research have shown that the water as supplied has no plumbo-solvent properties. No contamination of the supply occurred during 1966.

Chemical and bacteriological analysis have been constant and satisfactory throughout.

Number of Samples examined during 1966

			<i>Chemical</i>	<i>Bacteriological</i>
Raw water—Fleam Dyke	2	12
Raw water—Fulbourn	13	51
Raw water—Great Wilbraham		..	2	12
Raw water—Babraham	2	12
Treated water—Fulbourn	nil	51
Treated water—Babraham	nil	12
Drawn from the distribution system	..		4	24

Number of Dwelling-houses within the City at 31st December, 1966

(a) Directly supplied from tap	30,295
(b) Supplied by standpipes	None
(c) Supplied by private wells, etc.	None

Analysis. The following report on the examination of a sample drawn from the distribution system on 5th October, 1966, may be taken as typical:

Chemical Results in Parts Per Million

Appearance clear and bright.			
Colour	nil	Turbidity	nil
pH	7.4	Odour	nil
Electric Conductivity	480	Free Carbon Dioxide	16
Chlorine present as Chloride	17	Total Solids	345
Hardness: Total	130	Alkalinity as Calcium	
Nitrate Nitrogen	10	Carbonate	190
Ammonical Nitrogen	0.00	Carbonate	130
Albuminoid Nitrogen	0.00	Non-carbonate	0
Zinc, Copper, Iron and		Nitrite Nitrogen	Absent
Lead	Absent	Oxygen absorbed	0.00

The fluoride content of the water is less than 0.10 parts per million.

Bacteriological Results

<i>1 day at 37°C. 2 days at 37°C. 3 days at 20–22°C.</i>				
Number of Colonies developing on				
Agar ..	0 per ml.	0 per ml.	1 per ml.	
	<i>Present in.</i>	<i>Absent from.</i>	<i>Probable No.</i>	
Presumptive coli-form Reaction ..	—ml	100 ml	0 per 100 ml.	
Bact. coli (Type I) ..	—ml	100 ml	0 per 100 ml	
Cl. welchii Reaction ..	—ml	100 ml		

The water is thus excellent for drinking and for domestic and trade purposes.

SWIMMING BATHS

There are eleven private and three public swimming baths in the city. All were regularly tested for purity during the year and the results were generally good.

In the city council's indoor swimming pool at Parkside the water is heated to 74°F and is constantly re-circulated. During the re-circulation cycle the water is strained and filtered and then re-chlorinated before being heated and returned to the pool. The chlorination level is maintained at 1.5 p.p.m. in the main pool and 0.5 p.p.m. in the small pool. The whole contents of the pools, 22,000 gallons, is circulated every four hours.

SECTION 4. SUPERVISION OF FOOD AND DRUGS

FOOD AND DRUGS SAMPLING

224 informal and 26 formal samples were taken. Of these, 22 were faulty in one way or another and the appropriate remedial action was taken. This action included three prosecutions, viz:

<i>Food or Drug</i>	<i>Offence</i>	<i>Result</i>
1. Pork sausage	Contained piece of concrete	Fine £15
2. Pork sausage	Mouldy	Fine £5
3. Kaolin	Improper admixture	Fine £30

In addition to these, six prosecutions were made because of contraventions which did not necessitate the Public Analyst's opinion, viz:

<i>Food or Drug</i>	<i>Offence</i>	<i>Result</i>
1. Salted beef	Decomposing	Not guilty
2. Coffee cake	Contained glass	Fine £10
3. Milk	Contained cardboard	Fine £5
4. Bread	Contained part cigarette	Fine £15
5. Pork sausages	Mouldy	Fine £12
6. Cake	Contained wire	Fine £20

One or two things have to be said. First, standards of food handling are not good enough. Second, going to court is an expensive, time-consuming, and sometimes unpleasant business. Third, it is unfortunately essential that food traders should be aware that if offences are committed court proceedings are likely because informal advice and remonstrations do not always suffice. Fourth, and last, the public must complain to this Department if they want really effective action to be taken. The number of complaints received is probably only the tip of the iceberg.

GENERAL SAMPLING

The following samples were submitted to the Public Analyst in Cambridge during the year:

Informal

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Almonds	2	2	—
Anadin	1	1	—
Apples	3	3	—
Aspirin	1	1	—
Aspro	1	1	—
Beef Sausage	2	2	—
Bread	2	—	2
Cake	1	—	1
Cereals	1	1	—
Cheese	6	6	—
Cocktail Sausages	1	1	—
Codis	1	1	—
Coffee	5	5	—
Corned Beef	1	—	1
Cough Mixture	6	6	—
Cream	2	1	1
Cream Cakes	6	5	1
Dried Fruit	6	6	—
Dried Vegetables	6	6	—
Effervescent Mouthwash Tablets	6	5	1
Fish Cakes	6	6	—
Fish Paste	1	1	—
Flour	6	6	—
Fruit Pie	1	1	—
Grapes in Syrup	1	—	1
Horseradish Relish	1	1	—
Ice Cream	16	15	1
Ice Lolly	1	1	—
Influenza Mixture	1	1	—
Jam	12	12	—
Jelly	5	5	—
Junior Dinner	1	1	—
Kaolin Powder	2	—	2
Lard	3	3	—
Lemons	2	2	—
Linctus Codeine	3	3	—
Liquid Chocolate	1	—	1
Lung Syrup	1	1	—
Maple Syrup	1	1	—
Marzipan	1	1	—
Meat Tenderiser	1	1	—
Milk	39	39	—
Oranges	7	7	—
Panadol	1	1	—
Peas	1	1	—
Phensic	1	1	—
Pork	2	1	1
Pork Pie	8	6	2
Carried forward	186	171	15

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Brought forward	186	171	15
Pork Sausages	7	5	2
Salad Cream	9	9	—
Sauces	3	3	—
Soda Mint Tablets	6	6	—
Soup	5	5	—
Steak and Kidney Pie ..	2	2	—
Vinegar	1	1	—
Wine Gums	2	2	—
Yoghurt	3	1	2
TOTAL ..	224	205	19

Formal

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Beef Sausages	2	2	—
Buttered Rolls	5	5	—
Cream Cakes	4	3	1
Ice Cream	2	2	—
Milk	8	8	—
Pork Sausages	4	2	2
Walnuts	1	1	—
TOTAL ..	26	23	3

National Pesticide Samples

	<i>Number</i>	<i>Genuine</i>	<i>Not Genuine</i>
Bread	1	1	—
Sugar Puffs	1	1	—
TOTAL ..	2	2	—

MILK

At the end of 1966 the following licences were in force:

	<i>Number</i>
Pasteuriser	1
Dealer in pasteurised milk	96
Dealer in untreated milk	17
Dealer in sterilised milk	44
Steriliser	1
Ultra heat treater	3

154 samples of designated milk were examined with the results given below:

<i>Designation of milk</i>	<i>No. of samples tested</i>	<i>Appropriate test</i>	<i>No. of samples</i>		
			<i>Passed</i>	<i>Failed</i>	<i>Void</i>
Pasteurised	131	Phosphatase	130	1	—
		Methylene Blue	116	6	9
Sterilised	23	Turbidity	23	—	—
(Untreated)	—	Methylene Blue	5	—	—

ICE CREAM

Fifty-five samples of ice cream were taken during the year and were examined by the Public Health Laboratory. They were graded according to Ministry of Health procedure as follows:

Grade 1 (Satisfactory)	32
Grade 2 (Fair)	13
Grade 3 (Unsatisfactory)	8
Grade 4 (very unsatisfactory)	2

LIQUID EGG (PASTEURISATION) REGULATIONS 1963

All suppliers of liquid egg were found to be from approved sources and no samples were submitted in order to spare the hard-pressed Public Health Laboratory Service unnecessary labour.

FOOD INSPECTION

Food may be of the nature, substance and quality which the purchaser demands in the sense of having the prescribed composition and being free from adulteration but it may, nevertheless, be unsuitable for consumption by being diseased or decayed. Inspection is designed to discover such food so that it may be got rid of safely.

MEAT INSPECTION

The service has functioned smoothly during the year. There was a slight decrease in throughput and an increase in condemnations. Cysticercus bovis, a parasitic condition of cattle which is transmissible to man, showed a marked increase from 50 carcasses to 189.

Graph of all animals killed (shown as cattle units) from 1936



Weight of meat condemned

	<i>Tons</i>	<i>Cwts</i>	<i>Sts</i>	<i>Lbs</i>
Beef	34	11	7	13
Mutton	1	10	4	12
Pork	31	8	4	1
Veal	—	14	5	10
	68	5	6	8

Percentage of carcasses

	<i>Cattle, excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>
Number killed	14,931	236	154	20,560	80,463
Number inspected	do.	do.	do.	do.	do.
<i>All diseases except Tuberculosis and Cysticerci:</i> Whole carcasses condemned	84	7	11	32	344
Carcasses of which some part or organ was condemned	3719	28	8	739	11,976
Percentage of the number inspected affected with disease other than Tuberculosis and Cysticerci	25·5	14·8	12·3	3·7	15·3
<i>Tuberculosis only:</i> Whole carcasses condemned	—	—	—	—	6
Carcasses of which some part or organ was condemned	2	2	—	—	851
Percentage of the number inspected affected with Tuberculosis	0·01	0·8	—	—	1·1
<i>Cysticerosis:</i> Carcasses of which some part or organ was condemned	150	—	—	—	—
Carcasses submitted to the treatment by refrigeration	142	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Figures for liver fluke, were as follows:

	<i>Cattle</i>	<i>Cows only</i>
1949	15.5 %	18.3 %
1950	24.4 %	16.1 %
1951	20.7 %	13.0 %
1952	20.6 %	12.1 %
1953	14.7 %	8.05 %
1954	16.6 %	7.9 %
1955	28.5 %	6.3 %
1956	20.4 %	3.8 %
1957	14.25 %	1.9 %
1958	21.0 %	9.46 %
1959	28.74 %	9.86 %
1960	17.64 %	3.8 %
1961	16.0 %	7.4 %
1962	12.4 %	4.9 %
1963	13.8 %	4.1 %
1964	13.3 %	28.0 %
1965	14.8 %	Nil
1966	23.4 %	0.4 %

This disease caused the loss, during the year, of 1812 beasts' livers and 1676 parts, 1 cow's liver and 141 sheep's livers.

The figure for cysticercus bovis, a parasitic disease affecting animals and human beings were as follows:

	<i>Cattle</i>	<i>Cows only</i>
1949	11 cases	
1950	28 cases	7 cases
1951	24 do.	6 do.
1952	41 do.	2 do.
1953	24 do.	– do.
1954	38 do.	1 do.
1955	43 do.	– do.
1956	22 do.	1 do.
1957	66 do.	– do.
1958	82 do.	1 do.
1959	53 do.	– do.
1960	57 do.	– do.
1961	31 do.	– do.
1962	31 do.	– do.
1963	92 do.	– do.
1964	137 do.	– do.
1965	50 do.	– do.
1966	189 do.	– do.

The 189 cases discovered represents 1.3 per cent of all cattle slaughtered.

INSPECTION OF FOOD OTHER THAN MEAT

<i>List of Foods condemned</i>						<i>Cwts</i>	<i>Sts</i>	<i>Lbs</i>
Bacon	7	5	2
Beef		3	13
Butter		2	5
Cheese		3	11
Chicken			3	4
Flour	1	6	2
Ham		5	3
Masle powder			11
Ox kidney		3	11
Paprika			7	2
Pearl barley		1	4
Rice	1	1	10
Tomatoes				12

Frozen Food Packets

Beans	188	Oranges	2
Beefburgers	69	Orange juice	33 tins
Beef dinners	12	Pastry	110
Beef steaks	9	Peaches	2
Braised steaks	9	Peas	651
Brussels Sprouts	32	Pies	59
Calves liver	12	Pineapple	4
Chicken dinners	9	Plaice fillets	87
Chicken portions	6	Prepacked joints	128
Chips	77	Raspberries	14
Cod portions	142	Rissoles	128
Faggotts	101	Sausages	34
Fish	2	Sausage rolls	5
Fish cakes	108	Shepherd's pie	15
Fish fingers	312	Sliced beef	83
Haddock fillets	88	Spinach	9
Ice cream	4	Sponges	9
Ice lollies	28	Steaklets	71
Kipper fillets	20	Steak & Kidney pies	9
Mixed vegetables	39	Sweet corn	49
Mousse	163		

Smaller quantities of the following were also dealt with

Baby food	Coffee	Indian dried fish
Beer	Cordial	Indigestion tablets
Beef curry	Cough sweets	Laxatives
Blancmange powder	Custard powder	Limmits
Cakes	Dried fruit	Macaroni
Cauliflower	Dried vegetables	Marshmallows
Cereals	Fruit juice	Mincemeat
Chicken	Fruit pies	Mince balls
Chutney	Golden syrup	Mousse
Cider	Ice cream	Mushrooms

Parsley stuffing	Salad cream	Steak & Kidney Puddings
Pickles	Salt	Sweets
Puddings	Sandwich spread	Tapioca
Puff pastry	Snack meals	Turkeys
Tinned rice puddings	Sausages	Wine
Sago	Semolina	

Tinned Goods

Meat	713
Fish	1104
Fruit	4054
Jam/Marmalade		17
Soup	129
Vegetables	2702
Milk	195
Cream	73

The City Council’s destructor has gone out of action and this has caused embarrassment because of lack of suitable incineration facilities. We are being helped by the Veterinary Investigation Centre which possesses an incinerator but it is highly desirable that the Council should possess a large incinerator of its own and I hope there will be no undue delay in providing a replacement for the facilities offered by the old destructor.

SUPERVISION OF FOOD PREMISES

There are 916 food premises in the City and the following figures show the various trades carried out. The difference in the totals is accounted for by the fact that many places sell more than one commodity.

Bakehouses	25
Butchers’ shops	83
Fish and Chips shops		21
Wet Fish dealers	21
Restaurants	74
Residential Catering Establishments		79
Retail Shops	461
Licensed Premises		223
Food Manufacturers		10
Canteens	79
Dairies	8
Stalls	21
Chemists	21
Warehouses	12
Grocery	115
Greengrocery	75

Certain premises which are used for the manufacture, storage or sale of some kinds of food have to be registered with the Council under Section 16 of the Food and Drugs Act 1955. They are divided as follows:

Manufacture and sale of ice cream	2
Sale only of ice cream	234
Preparation of sausages and potted, pressed or preserved food	77

Three new applications for the sale of ice cream were granted during the year.

Visits made to food premises numbered 2,080, and 170 notices requiring compliance with the Food Hygiene Regulations were given. There were no prosecutions taken under the Regulations.

Eighteen notices to provide wash basins (Section 16 Food Hygiene (General) Regulations 1960) and two notices to provide sinks for washing equipment or food were served under regulation 19.

SECTION 5. HOUSING

REPAIRS TO HOUSES

Number of houses in which repairs were done:

(a) Housing Act 1957:

(i) formal action	1
(ii) informal action	3
					<hr/>
				Sub-total:	4
					<hr/>

(b) Public Health Act 1936:

(i) formal action	5
(ii) informal action	50
					<hr/>
				Sub-total:	55
					<hr/>

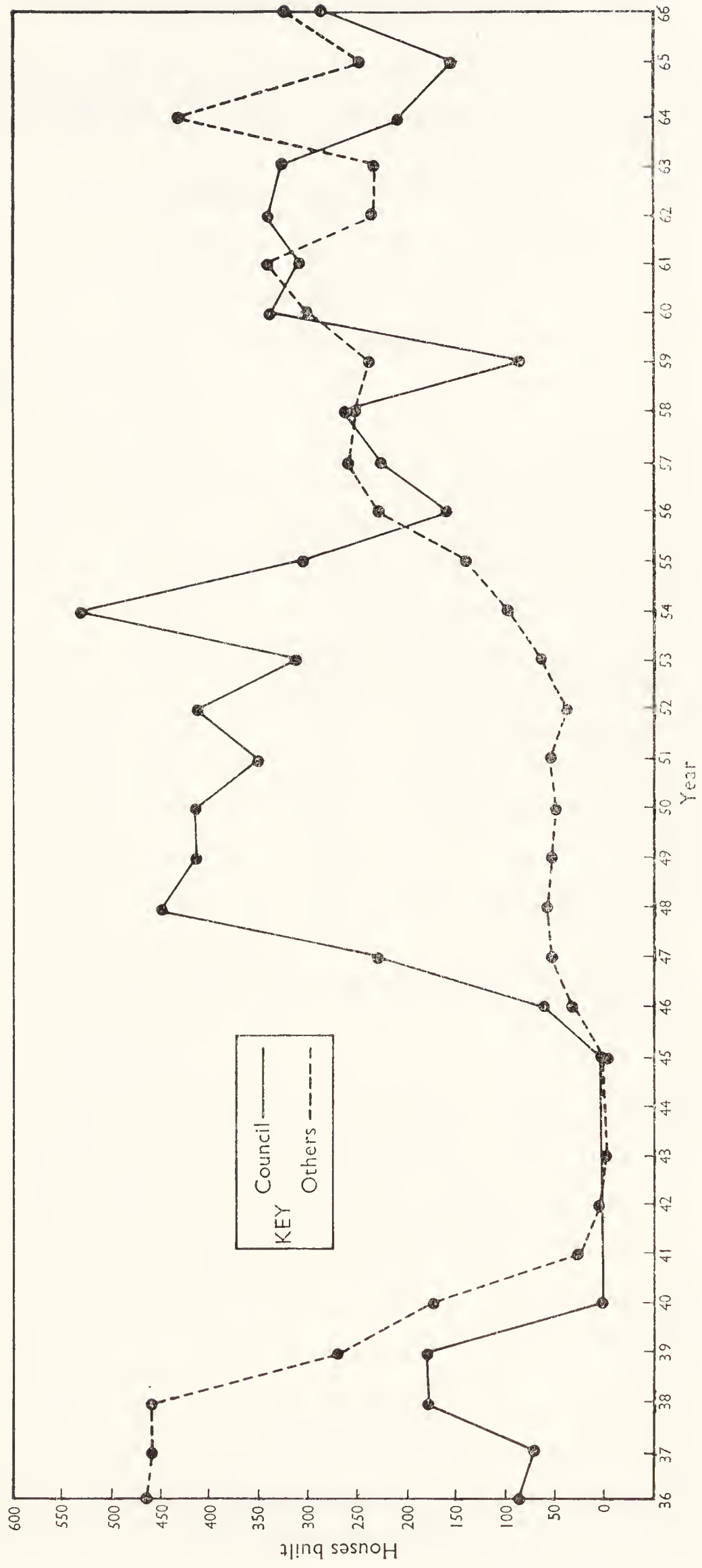
TOTAL: 59

This work involved 825 visits.

NEW HOUSES

Houses erected by the Local Authority and private enterprise since 1919.

	<i>Erected by the Local Authority</i>	<i>Erected by others</i>	<i>Total</i>
1920	40	23	63
1921–1930	1226	1192	2418
1931–1940	1417	3382	4799
1941–1950	1558	279	1837
1951–1960	2970	1673	4643
1961	300	349	649
1962	356	246	602
1963	331	241	572
1964	198	441	639
1965	164	259	423
1966	282	324	606
Totals	8842	8409	17251



CLEARANCE OF HOUSES

Under Section 2 of the Housing Act 1957, supplementary proposals were submitted to the Minister. These proposals affected 3,045 houses.

Progress in Housing Clearance

Housing Act, 1957, Sections 16 and 17

(Also voluntary action)

Individual Houses

	<i>Action taken during 1966</i>
Closing orders made	1
Undertakings accepted (not to use for human habitation) ..	10
Undertakings accepted (to make houses fit)	1
Undertakings given to demolish (Circular 33/56)	3
Demolitions following Undertakings	61
Demolition (by owners) (Demolition Orders)	29
Demolished by private concerns (voluntarily)	2
Demolished by local authority	—
Purchased by local authority for:	
Temporary accommodation	—
Demolition	—
Improved out of 'demolition' class	6

Housing Financial Provisions Act, 1958. Section 3

Certificates of unfitness:

Issued	13
Demolished	—

Housing Act, 1957. Section 42

Clearance area procedure

Post-war clearance areas:

Demolished	112
Still occupied	146

Allocation of Council houses absorbed during the year: ..	87
Individual unfit houses represented to the Council: ..	4

Houses demolished after action by the Council

Before the year	1930	18
During the years	1930–1939	438
do.	1940–1945 (War Years)				36
During the year	1946	5
do.	1947	–
do.	1948	3
do.	1949	4
do.	1950	7
do.	1951	11
do.	1952	25
do.	1953	19
do.	1954	6
do.	1955	23
do.	1956	66
do.	1957	87
do.	1958	93
do.	1959	102
do.	1960	138
do.	1961	140
do.	1962	172
do.	1963	99
do.	1964	38
do.	1965	72
do.	1966	202
Total					<hr/> 1804 <hr/>

Standards of fitness People have widely varying ideas of what, in a house, constitutes fitness for human habitation. The law, however, is quite specific and section 4 of the 1957 Housing Act gives a list:

- (a) repair;
- (b) stability;
- (c) freedom from damp;
- (d) natural lighting;
- (e) ventilation;
- (f) water supply;
- (g) drainage and sanitary conveniences;
- (h) facilities for storage, preparation and cooking of food and for the disposal of waste water;

This list is exclusive: one is specifically confined to these points.

The fact that a tenant is satisfied with a house, however reasonable this may seem, does not of itself count one way or the other. Conversely should the tenant dislike the house or be determined to secure rehousing by disparaging it the assessment ignores this also. Ugliness or beauty are equally disregarded as it can be argued that both lie in the eye of the beholder.

The standards of fitness, then, are based on these eight points and in applying them, two matters must be considered. A house may fall so far short of them that it should be demolished, or a house, admittedly falling short, should be repaired to conform to them.

When a house is so defective in the matters mentioned in Section 4 that it is unfit, all other factors are ignored. For instance, hot water or the presence of a bathroom, two civilised amenities by any account, do not influence the decision as to unfitness. Some houses, therefore, without a bathroom are fit, and some with a bathroom are unfit. Although no new house is allowed to be built without a bathroom the standard of fitness ignores this.

Consider the approach to an unfit house however when the indications are that the repair will be worthwhile. It must always be remembered that 'unfitness' as applied to a house is not a term implying irrevocable condemnation—the house can be unfit because one slate is missing and when that slate is replaced the house becomes fit. Normally the owner is presented with a list of shortcomings and he may agree to put these right. If he does so the house is considered fit but it may still be lacking, for instance, a bathroom. If the repairs have necessitated substantial rebuilding then improvements as distinct from repairs would be obviously cheaper to instal at the time rather than later. The blunt truth is that anyone faced with a large bill for repairs would be well advised to direct his efforts, in the ultimate, to producing a house with modern facilities rather than merely doing the repairs required by the Council under their statutory powers. This brings up the question of improvement grants.

Improvement Grants and Improvement Areas Since 1949 it has been possible for owners to claim a cash grant towards the provision of certain improvements to houses—these are bath, wash basin, sink with hot and cold water, ventilated food store and inside water closet. It is also possible to claim a grant towards the cost of converting a house into flats. This system has been entirely voluntary and has not produced the number of applications expected. In practice improvement grants have gone almost entirely to owner-occupiers. For a tenanted house the owner may increase the annual rent by 12½ per cent of the cost of the improvements but even this inducement has only produced four applications in Cambridge.

The Housing Act, 1964, contained powers to require compulsory improvements. These could be done either to single houses at the tenants' request, or to areas of houses selected by the Council. All other conditions of grant would apply. At first sight this seemed to be the answer to the problem of the many houses, sound in construction and therefore fit according to the Act, but short of the basic amenities quoted above.

Accordingly six areas of the City were surveyed, containing 907 houses. These were areas containing houses with the required life expectation of

15 years and a normal request for an improvement grant would have been agreed automatically. Only about twenty owners or tenants said they were willing to have their house improved. The reasons for refusal included a complete lack of interest and disinclination to have the trouble of conversion. The question of increased rent was not raised as detailed costs would be necessary, so it was likely the figure of twenty acceptances could shrink further. The Council therefore decided the Act was not workable so far as improvement areas were concerned.

The reasons for failure would seem to be:

- (a) the lack of compulsion on unwilling owner-occupiers
- (b) the five year delay before compulsion could be applied to unwilling tenants
- (c) the absence of sizeable areas of houses in single ownership or even consistently tenanted
- (d) the lack of interest by many people in the possession of facilities normally taken for granted
- (e) the general standard of fitness under section 4 of the 1957 Act is too low—the difference, to be made up by Improvement Grant procedure is unattainable under present powers

SECTION 6. OTHER MATTERS OF ENVIRONMENTAL HYGIENE

SEWERAGE AND SEWAGE DISPOSAL

The City is adequately sewered on the 'separate' system. This means two sets of pipes are provided, one for rain or 'storm' water and the other for foul water. This system is adopted for inland towns where it is essential to exclude all but foul water from sewage treatment works in order to reduce volume and, incidentally costs, by ensuring that comparatively clean water does not overburden the works.

Both storm and foul water eventually find their way into the Cam, the storm directly and the foul via the treatment works on Milton Road. The luxury of gravity flow to the works is denied us by the flatness of the land and pumping must be done to produce the necessary head at the works. Detritus tanks and filter beds are provided and the effluent conforms to the stipulations of the Great Ouse River Board.

DRAINAGE WORK

When complaints about choked drains are received an employee of the Department visits with rods and plunger. If the obstruction can be removed easily he does it. This is a service to the general public and also to the clerical staff of the Department who are thereby spared much paper work.

Any jobs requiring excavations or equipment which this Department does not possess are dealt with either by the City Surveyor or the owner's contractors. Willingness to help on the part of the City Surveyor's staff makes this work easier than it might be and thanks are given.

Thirty-six drains involving 46 houses were dealt with by the Health Department staff. Where excavation is required the work is referred to the City Surveyor. A total of 58 sewers involving 191 houses were referred to him during 1966, the cost of work done amounting to £351 15s. 7d.

In 1965 35 drains involving 95 houses were referred to the City Surveyor at a cost of £688 19s. 8d.

DISINFESTATION

Arising out of inspections or complaints, 40 Council and 14 other premises were found to be infested with bed bugs, fleas, lice, cockroaches and other pests and were all treated. Where necessary, bedding and furnishings were disinfected or destroyed.

The department has continued to advise householders and tradespeople on how to rid their premises of insect pests and we have assisted the police

in dealing with verminous persons. The Corporation Tips in Coldham's Lane have been sprayed regularly during the summer months.

During 1966 there was the usual number of neglected old people to care for, usually men who have outlived their kith and kin. 6 men and two women were disinfested but it is not usually possible to keep this type clean and return visits are often necessary. There is a multiplicity of organisations prepared to help these people but they often do not want to be helped and compulsion is a distasteful business.

INSPECTION OF FACTORIES

The Council is responsible for enforcing parts of the Factory Act 1937 relating to sanitary accommodation for all factories.

Where there is no mechanical power in a factory, provisions on cleanliness, overcrowding, heating and ventilation are also administered by the Council. Routine visits are made by the Public Health Inspectors and a factory register has to be kept.

Lists of outworkers or persons who do work in their homes in connection with a factory must be regularly sent to the local authority.

There are 416 factories on the register.

230 visits were made to these factories during the year and 14 visits were made to building and engineering works. Notices regarding defects were served in 18 cases, other matters being dealt with informally.

The following tables, which are in the form required by the Minister of Labour, give particulars of the administration of the Acts in this area.

1. *Inspections for the Purposes of Provisions as to Health*

<i>Premises</i> (1)	<i>Number of</i>		
	<i>Inspections</i> (2)	<i>Written notices</i> (3)	<i>Occupiers prosecuted</i> (4)
Factories with mechanical power	230	18	—
*Other premises under the Act (Not including outworkers' premises) .	14	—	—
Total ..	244	18	—
*Electrical stations should be reckoned as factories			

2. Defects Found

Particulars (1)	Number of defects			Number of defects in respect of which prosecutions were instituted (5)
	Found (2)	Remedied (3)	Referred by H.M. Inspector (4)	
Want of cleanliness (S. 1)	3	1	—	—
Overcrowding (S. 2)	—	—	—	—
Unreasonable temperatures (S. 3) ..	—	—	—	—
Inadequate ventilation (S. 4) ..	—	—	—	—
Ineffective drainage of floors (S. 6)	6	6	—	—
Sanitary conveniences (S. 7) { insufficient	—	—	—	—
unsuitable ..	19	6	1	—
not separate	1	1	—	—
for sexes ..	7			
Other offences (Not including offences relating to Home Work or offences under the Sections mentioned in the Sched- ule to the Ministry of Health (Fac- tories and Workshops Transfer of Powers) Order, 1921, and re-en- acted in the Third Schedule to the Factories Act, 1937)	—	—	—	—
Total ..	36	14	1	—

3. *Outworkers*

(Factories Act, 1961, Section 133)

Total lists received from employers during the year	45
Total lists received from other Councils during the year	11
Total lists forwarded to other Councils during the year	23
Contraventions found	—
Action taken	—

4. *Registered Factories*

Factories on the Register (Section 8) at the end of the year .. 416

5. Other Matters

Matters notified to H.M. Inspector of Factories:

Class		Number
Failure to affix Abstract of the Factory and Workshops Act (S. 128)	—
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory Acts (S. 3)	—
	Notified by H.M. Inspector ..	—
	Reports of action sent to H.M. Inspector ..	—
Others	—

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

General Inspections have continued at a satisfactory rate and during the year 743 premises were given a general inspection. By the end of the year this had reduced the number of registered premises not inspected to 24.

Number of Registered Premises

Offices	636
Shops	706
Watehouses	46
Catering	117
Fuel Storage	3
Total	1508

Contraventions and Enforcement 584 notices were served itemising 1444 contraventions. Again a high percentage of these were of a minor nature such as absence of abstracts and thermometers.
It has not been necessary to institute legal proceedings or to grant a formal exemption.

Analysis of Defects

<i>Section</i>	<i>Subject</i>	<i>No.</i>
4	Cleanliness	95
5	Overcrowding	38
6	Temperature	10
7	Ventilation	58
8	Lighting	41
9	Sanitary accommodation	197
10	Washing facilities	135
11	Drinking water	13
12	Clothing accommodation	11
13	Sitting facilities	1
14	Seats for sedentary workers	4
15	Eating facilities (shops only)	3
16	Floors, passages and stairs	165
17	Exposed machinery	65
24	First aid equipment	196
50	Display of abstract	422
Total		1444

Accidents 28 accidents were reported during the year (none fatal) and 19 of these were investigated. The most frequent single cause was, again, falls (18). One serious accident involved machinery—maintenance was being carried out to a newly installed escalator involving two men stripping the protective polythene from the stairs. One man became tangled with the machinery in the access pit at the bottom and sustained severe injuries which necessitated amputation of the left arm above the elbow. The safety precautions taken in carrying out such procedures left much to be desired and a full report was made to the Minister of Labour. It is hoped that the investigations carried out into the causes of the accident will lead to national recommendations on safety precautions to be adopted when carrying out this work.

COMMON LODGING HOUSES

There are two registered common lodging houses in the City. Both are operated by professional organisations skilled in the work and no complaints were received as to their management.

The Church Army Hostel in Willow Walk is a comparatively modern building with thirty-four beds. There is a resident Captain who works closely with the Department of Public Health.

The White Ribbon, East Road, is a hostel operated by the Salvation Army with forty-three beds. As reported in my 1963 report a Compulsory Purchase Order taken with a view to providing a site for a bigger and better hostel was truncated by the Minister. The effect of this has been to make it almost impossible to carry out the original scheme on this site. A further complication has arisen by the tenuous designation of the 'East Road Area' including the White Ribbon site, for redevelopment. This has effectually stultified any similar development in the area until a comprehensive plan has been evolved for the whole. The Salvation Army, being acutely aware of the need for this accommodation, are desperately anxious to go ahead with building something somewhere in Cambridge. They are willing to accept other sites and the City Architect has promised to do what he can to help.

The Council has always valued the social and housing work of the Salvation Army and is well aware of their contribution in housing single men who might otherwise be very difficult to accommodate. Accordingly negotiations are proceeding and it is hoped that the financial aspect—always the most recalcitrant—will be resolved and thus allow the practical work of design and building to commence.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

Three premises are registered under this Act and are in a satisfactory condition.

DISEASES OF ANIMALS (WASTE FOODS) ORDER, 1957

This order places on local authorities the responsibility of inspecting and licensing waste food boiling plants. Every collector of waste foods must boil the material in a licensed plant before feeding it or redistributing it for feeding purposes. Collectors having not more than four weaned pigs or 50 head of poultry who boil waste foods for feeding on their premises to their own stock, do not need to have licences.

Twenty-seven waste food boiling plants have been inspected and licensed.

RODENT CONTROL

In 1966 1,030 complaints were received and 4,880 visits were made by the ratcatchers. This was an exceptionally busy year with hardly a day's respite from complaints. This service is carried out by the City Council and is free to householders within the City. Business premises treated are charged at 7/- per hour actual time spent on the premises.

Municipal refuse tips and ditches are other continual sources of trouble. Regular visits are made to the City Council's tip in Coldhams Lane to ensure that it is kept as rat free as possible. Ditches are also kept closely watched. Raticate, a poison which came on the market in late 1965 has been used this year with good results. Raticate is a rat killer only, it is harmless to household pets and farm animals. This of course not only helps the ratcatcher but puts the public's mind at ease.

ANIMAL BOARDING ESTABLISHMENTS ACT 1963

There are two premises registered under this Act, both of these were inspected during the year and found to be well run.

RIDING ESTABLISHMENTS ACT 1964

Two premises have applied for registration under this Act. Both of these have been inspected and found to be satisfactory.

CARAVANS

There are two licensed caravan sites in the City. These were chosen to remain as permanent sites on town planning grounds and public health requirements were thereupon framed.

The site at Fulbourn Road, Cherryhinton complies with requirements and is well maintained.

The site at Fen Road, Chesterton attracted a lengthy and expensive list of requirements. Some of these remain to be carried out but the provision of flush sanitation inside a permanent block has been achieved and is a major step. The management of the site leaves much to be desired and the

tenants do not improve things by self help. Progress, although slow, has been substantial but we must reconcile ourselves to the fact that this site will probably need constant and wearing supervision to keep it, to say the least, sanitary.

From time to time requests are received to station single caravans temporarily in back gardens of houses. The essential requirements are enforced in accordance with the time of tenure granted.

Sydney Farm, Mill End Road, Cherryhinton, is a pleasant site with a rural atmosphere. Planning permission expires in mid-1967 and limited conditions were imposed and works carried out.

Part IV

WELFARE SERVICES

SECTION 1. GENERAL WELFARE SERVICES

HOME HELPS

The following table summarises the work which was done during the year.

<i>No. of cases receiving help at beginning of period</i> (1)					<i>No. of new cases during period</i> (2)					<i>No. of cases terminated during period</i> (3)					<i>No. of cases remaining at end of period</i> (4)				
M	T	CS	O	T	M	T	CS	O	T	M	T	CS	O	T	M	T	CS	O	T
8	4	415	79	506	207	—	216	109	532	201	—	196	120	517	14	4	435	68	521

<i>No. of persons receiving help during period</i> (5)					<i>No. of Home Helps employed</i> (6)		<i>No. of hours of duty performed</i> (7)	<i>No. of cases investigated but no help given</i> (8)				
M	T	CS	O	T	<i>full time</i>	<i>part time</i>	<i>TOTAL</i>	M	T	CS	O	T
215	4	631	188	1038	36	112	122375.75	80	—	33	69	212

M=Maternity Case
T=Tuberculosis
CS=Chronic Sick
O=Others
T=Total

No. of patients on full rate 161
No. of patients on assessment 877
Total income £10,064. 13s. 4d.

Neighbourly Help In addition to the ordinary Home Help Service, we are able to arrange, from time to time, for neighbours to give help to old people living alone. especially in the evenings and at weekends.

HEALTH VISITING

The full establishment is 16 Health Visitor/School Nurses. The number of visits paid by the Health Visitors is shown in the following table. The Health Visitors are also School Nurses and therefore only a part of their time is given to Health Visiting.

First visits to infants born in 1966	1515
Subsequent visits to infants	4993
Visits to children born in 1965	3587
Visits to children born in 1961/64	5815
Visits to expectant mothers	302
Visits re care of the aged	2176
Visits to cases of tuberculosis	6
Visits on behalf of Addenbrooke's Hospital to homes of patients before or after admission			95
Visits to other cases	1583
*Fruitless visits	3781
			<hr/>
			23853 (1965—21146)
			<hr/>

The Health Visitors have a good relationship with most of the general practitioners. One large group practice has regular monthly meetings with the Health Visitors on their area, while two other large group practices welcome consultations by arrangement.

The Health Visitors follow up patients discharged from Regional Hospitals as requested, particularly those from the Geriatric Unit.

HOME NURSING

The establishment is 15 full-time nurses but, usually, several part-time nurses have to be employed to make up the equivalent of this number. The work done throughout the year is summarized as follows:

The number of cases on the books at 1/1/66	377
New cases in 1966	1325
	<hr/>
	1702 (1965—1505)
	<hr/>
No. of Visits paid: Medical	29767
Surgical	7065
Infectious Diseases	—
Tuberculosis	12
Maternal Complications	111
	<hr/>
	36955 (1965—36061)
	<hr/>

* Calls at houses where no one was at home or where, for some other reason the object of the visit could not be attained.

SECTION 2. MATERNAL AND CHILD WELFARE

MATERNITY AND MIDWIFERY

Midwives The Non-Medical Supervisor of Midwives is Miss I. Worsfold, S.R.N., S.C.M., H.V.Cert., (Ranyard Nurse) who is the Superintendent Nursing Officer.

Thirteen midwives gave notification of intention to practise in the City during the year. (4 left during the year).

In addition to domiciliary and private midwives, 42 midwives notified institutional practise from the Maternity Hospital (9 of these left the district during the year), and 6 from the Evelyn Nursing Home.

Municipal Midwifery Service There was an establishment of 11 full-time midwives at the end of the year. They attended 524 cases (1965–568). These cases accounted for 36.9 per cent of the births of Cambridge residents. Part-time help with midwifery day-time visits was available when needed.

The number of visits paid to midwifery cases was 10,010. The number of ante-natal visits was 6,430.

Gas and Air Analgesia was administered by the midwives in 13 cases; Trilene in 384 cases.

Births The number of births in Cambridge notified during the year to parents who normally reside in the City is as follows:

	1966		1965	
Notified from Nursing Homes ..	90	(6.4%)	109	(7.5%)
Notified from Maternity Hospital ..	794	(56.7%)	779	(53.5%)
Notified from patient's own home ..	516	(36.9%)	568	(39.0%)
	<hr/> 1400		<hr/> 1456	

Ante-Natal and Post-Natal Clinics The usual monthly ante-natal session was held at Auckland Road Clinic, and the attendances are shown in the following tables:

<i>Total Attendances:</i>		1966	1965
Ante-Natal ..		64	95
Post-Natal ..		1	5
		<hr/> 65	<hr/> 100

<i>Classification of Patients:</i>	<i>Brought forward from 1965</i>	<i>New Cases in 1966</i>	<i>Total Number who attended in the year</i>
No. of Patients who had examinations and were found to be non-pregnant	—	—	—
No. who had ante-natal examinations only (no subsequent post-natal in 1966)	2	32	34
No. who had ante-natal examinations and returned for post-natal	—	1	1
No. who had post-natal only (no previous ante-natal) ..	—	—	—
	2	33	35
	—	—	—
	(1965)	(65)	(67)

Relaxation Exercise classes in connection with the Municipal Midwifery Service were held at Romsey Clinic on Thursday afternoons, conducted by the municipal midwives. 12 courses (1965—18) were held consisting of 5 classes each, and 9–11 expectant mothers were accommodated in each class. 668 attendances were made during the year. In 1965, 764 attendances were made.

INFANT WELFARE

Premature Births The number of live premature births (*i.e.*, birth weight 5 lbs. 8 ozs. or less) in the cases of City residents during 1966 was 61, and the survivals at the end of one month were:

	<i>Year of Birth</i>		<i>Survived at end of One Month</i>	
	<i>1966</i>	<i>1965</i>	<i>1966</i>	<i>1965</i>
Born at Home ..	6	14	6	13
Born in Hospital ..	54	72	49	61
Born in Nursing Home	1	2	1	2
	—	—	—	—
	61	88	56	76
	—	—	—	—

Special attention is given to this group of infants by the Health Visitors.

Infant Welfare Clinics Twelve infant welfare sessions were held weekly and one fortnightly in the City at ten centres. Toddler sessions, for children of 18 months to 5 years, who attended by appointment were held at five centres: Romsey, Cherry Hinton, Auckland Road, East Barnwell and Arbury.

The usual activities of weighing babies, giving advice to the mothers, and selling foods were carried on at all the centres. Proprietary brands of dried milk were sold at cost price. Accessory food substances, *e.g.*, Virol, Marmite, Calcium, Iron and Vitamin Tablets were also obtainable.

In addition, the centres functioned as depots for the distribution of National Dried Milk, Cod Liver Oil, Vitamin Capsules and Orange Juice for expectant mothers and children.

ATTENDANCES AT MATERNITY AND CHILD WELFARE CLINICS DURING THE YEAR 1966

Clinic	Day and Time Held	No. of Sessions held in the Year	New Cases		No. of Attendances				Nos. who attended in the year, and who at the end of the year were:				Doctors Consultations		
			1-5		1966		1965		Born 1964/61	0-1		1-2		2-5	
			0-1	1-5	Born	1966	Born	1965		0-1	1-2	2-5			
Arbury Road	I.W.C.	Monday p.m.	48	8	900	790	198	292							
Arbury Road	I.W.C.	Tuesday a.m.	48	14	568	631	317	718		207	222	346			
Arbury Road	Todd.	p.m.	17	7	—	28	201	227							
Auckland Road	I.W.C.	Tuesday p.m.	48	8	836	637	120	373							
Auckland Road	Todd.	Friday p.m.	10	9	1	13	129	142		96	64	103			
Castle Street	I.W.C.	Tuesday a.m.	48	12	676	614	374	385							
Castle Street	I.W.C.	Tuesday p.m.	48	13	892	597	335	419		179	121	191			
Cherry Hinton	I.W.C.	Monday p.m.	48	8	610	552	270	320							
Cherry Hinton	I.W.C.	Thursday p.m.	47	15	644	545	284	547		159	139	210			
Cherry Hinton	Todd.	Friday a.m.	11	4	—	41	126	164							
Chesterton	I.W.C.	Thursday a.m.	8	—	48	6	—	—							
Chesterton	I.W.C.	Thursday p.m.	48	19	1259	1075	266	788							
Chesterton	Todd.	Friday p.m.	16	7	—	8	232	236		154	130	211			
East Barnwell	I.W.C.	Tuesday p.m.	48	3	779	836	260	492							
East Barnwell	Todd.	Friday p.m.	10	2	—	20	148	165		79	105	160			
Newnham	I.W.C.	Wednesday p.m.	48	5	391	332	162	322		58	57	52			
Norwich Street	I.W.C.	Wednesday a.m.	48	8	511	407	118	287		61	54	36			
Romsey	Todd.	Monday p.m.	12	5	—	18	175	190							
Romsey	I.W.C.	Wednesday p.m.	48	17	993	803	352	647		200	162	258			
Romsey	I.W.C.	Thursday a.m.	48	9	417	428	259	267							
Trumpington	I.W.C.	1st & 3rd Monday in Month	24	9	216	391	121	309		32	43	41			
			731	1352	182	9741	8772	4447		1225	1097	1608		7290	
(1965)			(734)	(1306)	(211)	(9598)	(9076)	(4440)		(1143)	(1174)	(1619)		(7846)	

Test Feeds During the year infant weighing machines were lent out 98 times (1965—141) to mothers, to enable them to carry out 24-hour test feeds at home.

Phenylketonuria Some children are born with a disorder of metabolism which quickly leads to irreversible brain damage so that they become severely subnormal mentally. Although the incidence of this state is only about 1 in 20,000 the recent introduction of a simple urine test to reveal the condition makes it worth while carrying out as a routine for, if discovered shortly after birth, suitable dietetic treatment usually prevents brain damage and enables the child to grow up mentally normal. The health visitors are now testing the urine of all babies for phenylpyruvic acid at two weeks and again at six weeks. So far we have not discovered a case of this abnormality but this, of course, is a very welcome discovery.

Congenital dislocation of the hip This condition, if not corrected early in life, leads to a serious abnormality in walking or necessitates the alternative of an operation and more or less lengthy period in a plaster cast. All our midwives have received instruction in early testing for congenital dislocation of the hip and they examine every child whom they deliver at the age of three days.

NURSERIES

Sedley Day Nursery This Nursery takes 40 children 0 to 5 years full-time, and 3 part-time. The Nursery is in the charge of a Matron (S.R.N.) with a Deputy Matron and Warden, 1 Nursery Nurse and 2 Nursery assistants. It is open Monday to Friday from 8.30 to 5.30 p.m.

A Medical Officer visits the Nursery periodically and conducts a full medical inspection of each child. During the year the Medical Officer paid 3 visits to the Nursery and 92 inspections were carried out.

The Nursery is accepted by the Department of Education and Science and the Ministry of Health as a Training Centre for the training in practical work of a number of students who are taking the Nursery Nurses' Course at the Technical College. As a rule four students are under training at the Nursery.

The attendances during the year were as follows:

		Capacity		Average Attendance		No. on Waiting List	No. of Attendances	
		F.T.	P.T.	F.T.	P.T.		F.T.	P.T.
Age 0 to 2	..	14	—	11	—	23	2436	—
Age 2 to 5	..	26	3	22	1	99	5138	257

(F.T.=Full-time P.T.=Part-time)

Register of Private Nurseries and Daily Minders There were at the end of the year 16 registered private Nurseries accommodating 409 children in all, and 4 daily minders, minding 20 children.

MATERNITY AND CHILD WELFARE DENTAL SCHEME

The following table shows the treatment provided for expectant and nursing mothers and young children during the year.

	<i>Children 0-5</i>	<i>Expectant and Nursing Mothers</i>
First Visit	208	32
Subsequent Visits	217	9
Total Visits	425	41
Number of Additional Courses or Treatment other than the first course commenced during the year ..	20	—
Treatment provided during the Year:		
Number of Fillings	309	12
Teeth Filled	224	12
Teeth Extracted	72	37
General Anaesthetics given	26	4
Emergency Visits by Patients	15	1
Patients X-Rayed	—	1
Patients Treated by Scaling and/or Removal of Stains from the teeth (Prophylaxis)	12	2
Teeth otherwise Conserved	35	—
Teeth Root Filled	—	—
Inlays	—	—
Crowns	—	—
Number of Courses of Treatment Completed during the Year.. .. .	124	12
Patients Supplied with Dentures	—	3
General Anaesthetics Administered by Dental Officers	—	—
Number of Patients given First Inspections	53	9
Number of Patients who required Treatment	47	9
Number of Patients who were Offered Treatment	47	9

OTHER INFANT WELFARE SERVICES

Illegitimate Children A grant of £300 a year was paid to the Cambridge-shire Association for Social Welfare in virtue of their work among mothers of illegitimate children.

Child Life Protection The work of supervision of children 0 to 15 years old, boarded out for gain, is the responsibility of the Children's Committee under the Children Act, but the City Health Visitors continue to inspect and report quarterly to the Children's Officer on those foster-children who are under 5 years of age.

The number of foster-children on the register at the end of 1966 was 22 (1965—33), and the number of foster-mothers was 18 (1965—27).

Artificial Sunlight Clinics Ultra-violet Light Therapy was given twice weekly at both Auckland Road and Romsey Clinics. Most of the children were referred for treatment by City Medical Officers, and a few by private practitioners.

The number of children treated, the attendances, and the conditions for which they were recommended, are shown in the following table:

	<i>Auckland Road</i>		<i>Romsey</i>		<i>Total</i>	
	<i>1966</i>	<i>1965</i>	<i>1966</i>	<i>1965</i>	<i>1966</i>	<i>1965</i>
Brought forward from previous year ..	5	3	3	12	8	15
New Cases	12	7	4	10	16	17
	<hr/> 17	<hr/> 10	<hr/> 7	<hr/> 22	<hr/> 22	<hr/> 32
Of these:						
Completed the course..	5	3	3	18	8	21
Defaulted	5	2	2	1	7	3
Carried forward to next year	7	5	2	3	9	8
	<hr/> 17	<hr/> 10	<hr/> 7	<hr/> 22	<hr/> 24	<hr/> 32
<i>Number of Attendances</i>	97	111	69	256	166	367

Diphtheria and Whooping Cough Immunization, and Vaccination of Children under Five Immunization and vaccination is carried out at all Infant Welfare Clinics.

	<i>Vacc.</i>	<i>Diph.</i>	<i>Wh. Cough</i>	<i>Diph. and Wh. Cough</i>	<i>Diph. and Tetanus</i>	<i>Diph. Wh. Cough Tetanus</i>	<i>Tetanus</i>
By General Practitioners	602	—	1	—	329	950	132
At Infant Welfare Clinics	365	—	—	—	388	357	10
	<hr/> 967	<hr/> —	<hr/> 1	<hr/> —	<hr/> 717	<hr/> 1307	<hr/> 142

Speech Therapy 13 Children were referred for speech therapy in 1966 (1965—6).

Chest Clinic No Patients were referred to this clinic in 1966 (1965—0).

Routine Medical Inspections at Nursery Schools During the year an Assistant Medical Officer carried out a number of routine medical inspections of children under five attending Nursery Schools. Numbers inspected 282 (1965—322).

Handicapped Children Under 5 At the end of 1966 our registers contained the names of 29 mentally handicapped children and 53 physically handicapped.

SECTION 3. THE SCHOOL HEALTH SERVICE

GENERAL STATISTICS FOR 1966

Number of Schools:

Primary	32
Secondary Grammar	4
Secondary Modern	5
Special	2
Nursery	4

Number of Departments:

Nursery	4
Primary	38
Secondary Grammar	4
Secondary Modern	8
Special	2

Number of children on registers

1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966
12585	12692	13077	13187	13287	13260	13131	13402	13699	13877	13990

Average number of children in attendance

1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966
11548	11492	11695	12225	11296	11681	12044	12222	12302	12471	12871

SCHOOL MEDICAL INSPECTION

The usual arrangements for routine medical inspections in this country provide for an examination shortly after a child enters school, another at the age of ten and a final one as a ‘leaver’. In Cambridge children are examined at three-yearly intervals, so that the full range of routine medical inspection is:

1. At nursery school (every term)
2. At primary school as entrants (in the 6th year)
3. At primary school in the 9th year
4. At secondary school in the 12th year
5. At secondary school as leavers (in the 15th year)
6. At grammar school if remaining beyond the statutory leaving age (17 or 18).

Part I.—Medical Inspection of Pupils attending Maintained and Assisted
Primary and Secondary Schools (including Nursery and Special Schools)

Table A.—Periodic Medical Inspections

Age Groups inspected (By year of Birth)	No. of Pupils who have received a full medical examin- ation	Physical condition of pupils inspected		No. of Pupils found not to warrant a medical examination (See Note 1 above)	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory	Unsatisfactory		for defective vision (excluding squint)	for any other condition recorded at Part II	Total individual pupils
		No.	No.		(6)	(7)	(8)
		(3)	(4)		(5)	(7)	(8)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1962 and later	278	277	1	—	—	11	11
1961	660	650	10	—	6	90	88
1960	498	496	2	—	9	51	56
1959	—	—	—	—	—	—	—
1958	60	56	4	—	5	10	13
1957	29	29	—	—	3	7	8
1956	841	839	2	—	46	85	123
1955	274	273	1	—	32	38	64
1954	737	723	14	—	46	101	133
1953	421	419	2	—	23	62	84
1952	658	652	6	—	42	62	97
1951 and earlier	784	781	3	—	48	77	116
Total	5240	5195	45	—	260	594	793

Col. (3) total as a per- centage of Col. (2) total ..	91.1
Col. (4) total as a per- centage of Col. (2) total ..	85.8

Table B.—Other Inspections

Number of Special Inspections	218
Number of Re-inspections	1607
				Total	1825

Table C.—Infestation with Vermin

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	15408
(b) Total number of individual pupils found to be infested	100
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	34
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	—

Part II.—Defects found by Periodic and Special Medical Inspection during the Year

Defect Code No. (1)	Defect or Disease (2)		Periodic Inspections				Special Insp'ns (7)
			Entrants (3)	Leavers (4)	Others (5)	Total (6)	
4	Skin	T O	41 1	65 4	65 14	171 19	2 1
5	Eyes: (a) Vision	T O	37 15	49 95	106 150	192 260	4 75
	(b) Squint	T O	28 8	— 1	8 1	36 10	— 1
	(c) Other	T O	8 1	5 46	17 59	30 106	1 6
6	Ears (a) Hearing.. ..	T O	28 37	9 10	10 29	47 76	5 29
	(b) Otitis Media	T O	56 2	4 —	8 1	68 3	1 1
	(c) Other	T O	3 1	4 —	2 —	9 1	— —
7	Nose and Throat	T O	196 2	61 3	78 3	335 8	10 5
8	Speech	T O	36 10	5 3	7 3	48 16	3 11
9	Lymphatic Glands	T O	39 —	6 —	12 —	57 —	— —
10	Heart	T O	25 3	12 3	16 2	53 8	2 1
11	Lungs	T O	55 5	20 5	38 10	113 20	5 6
12	Developmental (a) Hernia	T O	6 1	3 1	2 —	11 2	— 1
	(b) Other	T O	2 —	2 1	1 —	5 1	— —
13	Orthopaedic (a) Posture	T O	5 5	18 25	32 68	55 98	2 15
	(b) Feet	T O	56 62	40 35	48 90	144 187	4 35
	(c) Other	T O	25 6	15 1	19 5	59 12	1 1
14	Nervous System (a) Epilepsy ..	T O	2 1	3 —	2 —	7 1	1 —
	(b) Other	T O	6 —	3 —	6 1	15 1	— —
15	Psychological (a) Development ..	T O	14 1	5 —	12 2	31 3	1 1
	(b) Stability ..	T O	88 —	31 2	84 3	203 5	16 1
16	Abdomen	T O	13 3	12 —	32 5	57 8	1 6
17	Other	T O	45 3	34 —	40 6	119 9	4 6

SUPERVISION AND TREATMENT

School Clinics

There are four sessions each week at the School Clinics: Attendances at the clinics were as follows:

Auckland Road	428
Romsey	989
Cherryhinton Hall	94

Part III. Treatment Tables

Table A. Eye Diseases, Defective Vision and Squint

	<i>Number of cases known to have been dealt with</i>
External and other, excluding errors of refraction and squint	—
Errors of refraction (including squint)	763
Total	763
Number of pupils for whom spectacles were prescribed	393

Table B. Diseases and Defects of the Ear, Nose and Throat

	<i>Number of cases known to have been dealt with</i>
Received operative treatment:	
(a) for diseases of the ear	49
(b) for adenoids and chronic tonsillitis	144
(c) for other nose and throat conditions	14
Received other forms of treatment ..	6
Total	213
Total number of pupils in schools who are known to have been provided with hearing aids:	
(a) in 1966	6
(b) in previous years	13

Table C. Orthopaedic and Postural Defects

	<i>Number of cases known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments ..	34
(b) Pupils treated at school for postural defects	794
Total	<hr/> 828 <hr/>

Table D. Diseases of the skin
(excluding uncleanliness, for which see Table D of Part I)

	<i>Number of cases known to have been treated</i>
Ring-worm—(i) Scalp	—
(ii) Body	—
Scabies	—
Impetigo	—
Other skin diseases	1
Total	<hr/> 1 <hr/>

Table E. Child Guidance Treatment

	<i>Number of cases known to have been treated</i>
Number of pupils treated at Child Guidance Clinics	215

Table F. Speech Therapy

	<i>Number of cases known to have been treated</i>
Number of pupils treated by Speech Therapists.. .. .	261

Table G. Other Treatment Given

	<i>Number of cases known to have been treated</i>
(a) Pupils with minor ailments ..	149
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	1043
(d) Other than (a), (b) and (c) above (specify)	—
(e) In-patients Addenbrooke's ..	233
Total (a)–(e) ..	1425

MENTALLY SUBNORMAL CHILDREN

No. of children reported to the Local Health Authority during 1966:
Under Section 57 (4) of the Education Act —

WORK OF THE SCHOOL NURSES

There is an establishment for 17 School Nurses, 16 of whom are Health Visitors and so only a part of their time is given to school work. The seventeenth nurse works full time at the Roger Ascham School.

The nurses' work is shown in the following table:

Attendances at schools

Routine medical inspections	338
Personal hygiene inspections	153
Other school visits	376

Attendances at clinics

Minor ailments and special sessions	162
Immunisation sessions	11

Home Visits 689

Eye Clinics 63

ARTIFICIAL SUNLIGHT

Ultra-violet Light Therapy is given at Auckland Road and Romsey Clinics.

The number of children treated, and their attendances are shown in the following table:

	<i>Auckland Road</i>	<i>Romsey</i>	<i>Total</i>
No. of new cases	8	6	14
Cases brought forward from 1965	4	—	4
Total	12	6	18
Total number of attendances	140	55	195

SPECIAL PROVISIONS

The Roger Ascham School This is a special school of 120 places catering for children who, for physical or other reasons, do not fit into the ordinary school system. It is situated in Ascham Road off Milton Road. The classrooms are all separate blocks spaced out in a pleasant garden and open grounds. Children from 5 to 16 years are admitted for periods varying with their needs; but the policy is, wherever possible, to give intensive treatment so that they may return to an ordinary school as soon as possible. Separate cloakroom and toilet facilities have now been provided for each classroom.

All children stay for lunch. Lessons are taken out of doors whenever possible, and emphasis is laid on other outdoor activities like games, dancing and swimming.

A medical officer attends for two sessions each week. A nurse is in attendance each morning. There are two full time physiotherapists and one half time physiotherapist who treat the children as required. The orthopaedic specialist and the paediatrician of Addenbrooke's Hospital visits the school.

Special transport is provided. There is no serious waiting list.

Cerebral Palsy Unit A special unit for the treatment and education of children suffering from cerebral palsy forms part of the Roger Ascham School. Three physiotherapists treat the children for whom there are two special classes: one for children under seven and the other for children above that age. Paediatric and orthopaedic consultants visit the unit regularly. About 17 children are usually under treatment at any one time, some being in the general classes of the school.

A detailed written record is kept of each child's command of posture and bodily movements and the changes which take place during treatment. In addition, cinematograph films are taken at intervals and these form a valuable record from which results may be assessed.

Diagnostic Unit In 1962 a special unit for mongols was started at the Roger Ascham School as experience had shown that some of these children can so benefit from special care and training that they might even secure paid work on leaving school. Latterly, however, the overall attendance has been only 4 and this has made it difficult to arrange group activities. Moreover, the amount of adult time and attention that is inevitably available for each child reproduces the over-protective atmosphere often associated with the child's own home.

Having regard to the foregoing the Education Committee decided that the unit should no longer be limited to mongols but might be more usefully employed for diagnosing the needs of any child who seemed likely to require special educational treatment. It functions with a maximum of 10 children. These are children who appear to be somewhat mentally retarded and are admitted to the diagnostic unit at just under 5 years old with a view to determining whether they are going to prove suitable for ordinary school, Educationally Sub-Normal School or Training Centre.

They stay for a minimum of 6 months and a maximum of 2 years. The unit is in the charge, under the Headmistress, of a teacher with considerable experience in the work of a diagnostic unit.

All children are seen with their parents before admission by a panel consisting of the School Medical Officer, the Educational Psychologist, the Headmistress and the teacher of the unit; and each child is reviewed every six months by the same panel in the presence of the parents.

The Special School for Educationally Sub-normal Children The Lady Adrian School in Courtney Way has accommodation for 130 children. 50 places are reserved for children from the County area outside the City.

The age range is from 7 to 16, and intelligence quotients range from about 48% to about 80% of average. This quotient is, of course, only a guide to admission, and other factors are taken into consideration when the assessment is made. These children, who would inevitably lose their confidence by working with children of superior ability in big classes, are helped to develop to the best of their potentiality by working to their own pace in small groups where friendly relations are easier to establish. Almost all the children are subsequently able to take their place in the community, and suitable employment is found for them before they leave the school. Contact with the home is established by regular visits by a member of the Cambridgeshire Mental Welfare Association, who reports to the school and who will also keep in touch with the children after they leave the school.

Drama, painting, dancing, handicraft and cooking as means of self-expression play an important part in the life of the school and help to develop the children's ability to enjoy comradeship and group spirit. Visits in the city and further afield stimulate their interest and broaden their outlook.

The greatest benefit is derived if children can be admitted before secondary school age.

Special transport is provided and a physiotherapist attends the school.

Remedial Exercises The work of the Physiotherapist and the Remedial Gymnast is set out below.

School departments visited					43
Children treated:					
Asthma					32
Foot defects					263
Postural defects					153
Breathing exercises					11
Cerebral Palsy					4
Poliomyelitis					2
					<hr/>
					465
					<hr/>

At the Roger Ascham School 58 children were treated.

Spastics					32
Breathing exercises					12
General Physiotherapy					5
Postural Drainage					2
Out-patients					7

Handicapped Pupils The following table shows the provision made for various categories of handicapped pupils.

Category	Number on Registers of Residential Special Schools at end of year				
Blind	3
Deaf	3
Physically Handicapped			2
Educationally sub-normal			3
Maladjusted	3

Speech Therapy The four speech therapists devote their time to the City and County Schools (under the Principal School Medical Officer of the County). The City is divided into four parts and a speech therapist works in each, treating children in the schools and at Auckland Road or Romsey Clinic according to the area. Two speech therapists attend at the Roger Ascham School every week including the Cerebral Palsy Unit. The Senior Speech therapist has received special training in the methods we employ in this Unit. One speech therapist attends the Lady Adrian School for four sessions a week.

261 children were treated during the year, the defects being:

Cleft Palate	2
Sigmatism	52
Partial Deafness	5
Cerebral Palsy	19
Other disorders of articulation & language					133
Stammer	40
Voice disorders	3
Others	7
					<hr/> 261 <hr/>

Audiometry An audiometrician visits the schools and sweep-tests all of the seven-year-old children and all children specially referred as possibly having impaired hearing. Those who fail are retested after a month. Failures of the second tests are referred, for further examination and treatment, to General Practitioners in cases of minor degrees of deafness, or to the Ear, Nose and Throat Specialist at the Hospital where gross hearing loss is present.

The numbers tested were:

Seven-year-olds	899
Special	280
The number of Re-tests were		394
The number who failed Re-tests		83
The number referred to General Practitioners	..				8
The number referred to Hospital		55
					}63

Partially Hearing Children There are two special classes for children with impaired hearing. Each is attached to an ordinary school. The class at Sedley School is for children in the nursery and infant range. The class at Mayfield School is for older children. Twice a month, there is a special audiology clinic at Addenbrooke's Hospital for schoolchildren from the City and County.

SCHOOL DENTAL SERVICE

Report of the Principal School Dental Officer, J. R. Toller, M.Sc.D., L.D.S.

Attendances and Treatment

First visit	3713
Subsequent visits	4350
Total visits	8063
Additional courses of treatment	422
Fillings in permanent teeth	4607
Fillings in deciduous teeth	2675
Permanent teeth filled	4372
Deciduous teeth filled	2556
Permanent teeth extracted	368
Deciduous teeth extracted	1265
General anaesthetics	303
Emergencies	586
No. of pupils X-rayed	189
Prophylaxis	204
Teeth otherwise conserved	213
No. of teeth root filled	9
Inlays	1
Crowns	9
Courses of treatment completed	2991

Orthodontics

New cases commenced	142
Cases completed	5
Cases discontinued	—
No. of removable appliances fitted	52
No. of fixed appliances	—
Pupils ref. to hospital consultant	16

<i>Dentures supplied</i>	6
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<i>Inspections</i> at school 1st	857
Inspections at clinic 1st	355
No. requiring treatment	923
No. offered treatment	837
Pupils re-inspected	4305
No. requiring treatment	2350

1335 sessions devoted to treatment
46 sessions devoted to inspections
2 sessions devoted to dental health

SCHOOL MEALS

The highest number of children having dinners on any day in week ended 18th November, 1966, was 8147 of which 476 were free (as compared with a total of 8323 of which 458 were free in week ended 19th November 1965). The total number on the free list was 584. Some food from school meals is returned for 36 hours for analysis in case of illness which may be attributed to eating it.

MISCELLANEOUS

Examination of Teachers During the year 136 candidates were examined prior to entering colleges for training as teachers.

Juvenile Employment 358 children were examined, during the year, to determine their fitness for employment.

Educational Psychologist The Authority's Educational Psychologist gave half his time to work in the City. He advises teachers upon problems of educational retardation and emotional disturbances. He also carries out assessments of intelligence and remedial teaching in reading.

SECTION 4. OTHER WELFARE SERVICES

WELFARE OF OLD PEOPLE

General The Health Visitors include care of the elderly in their normal duties and we maintain liaison with voluntary bodies such as The Cambridgeshire and Isle of Ely Old People's Welfare Council, to which the City Council makes an annual grant. Regular meetings are held of those principally concerned with the welfare of old people in the City and the County, and Meals on Wheels are provided by the W.V.S.

Persons in need of care and attention Section 47 of the National Assistance Act, 1948, provides for legal action to be taken by the Council in certain circumstances where it appears that persons in need of care and attention should be removed to more suitable premises. No such case arose during 1966.

Incontinence Pads Incontinence pads are supplied to all persons in need, the number being approximately 500 a month. Hospital type plastic bags for soiled pads are supplied by the department, and with the contents are either burned by the householders or taken by them to the Public Incinerator. When this involves hardship the district nurses themselves may collect and dispose of the bags in the Incinerator.

MENTAL HEALTH

The biggest contribution to the local mental health services during the year came about with the opening, by the Regional Hospital Board, of the Ida Darwin Hospital for the mentally subnormal. Although at present only three villas are open these have already permitted the admission of a significant number of mentally subnormal children and adults who, for a long time, had awaited permanent hospital care. We are extremely fortunate in having this hospital so near to the City and it will be a matter of comfort and pleasure for parents and others to have relatives, who are admitted to the hospital for either short or long periods of care, within such easy visiting distance.

The County Council opened a hostel for emotionally disturbed and maladjusted children on a site on the King's Hedges housing estate. The Cambridgeshire Mental Welfare Association prepared to open its second home of bed-sitting rooms for former psychiatric patients.

Thus the facilities for the care, treatment and training of the mentally disordered continue to increase, but so much of the help for the mentally ill and the mentally subnormal and their relatives depends on the mental welfare officers—Mr Bullwinkle (senior), Mr Palmer and Miss Ward—whose efforts on behalf of the patients in their care often go long into their leisure time. We are fortunate, too, in the many volunteers who give personal help and, amongst other organisations, I am pleased to see the development of the Fish Scheme whose help is available to all in need.

The statistics for the years are as follow:

Mentally Subnormal Persons

(a)	Admissions to hospitals for permanent care during 1966:	
	Under Section 60 of the Mental Health Act, 1959 ..	1
	Informal patients	8
	Discharged	2
	Died	3
	Transferred from Little Plumstead Hospital to the Ida Darwin Hospital	6
(b)	Awaiting permanent admission	16
(c)	Admissions to hospitals for periods of temporary care ..	4
(d)	Temporary care arranged elsewhere and with financial assistance by the Council	15
(e)	Attending Junior Training Centre	32
(f)	Resident on a weekly basis in the hostel attached to the Junior Training Centre	3
(g)	Attending Adult Training Centre	54
(h)	Resident in Edmund House	4
(i)	Under Council guardianship	—
(j)	Under guardianship to some other person	1
(k)	Receiving home teaching	9
(l)	Total number receiving home visits, including those in the above categories but excluding educationally sub-normal school children visited by mental welfare officers	151

Mental Illness

(a)	Hospital admissions during 1966:	
	Under Section 25 of the Mental Health Act, 1959 ..	13
	do. 60 do. ..	2
	do. 26 do. ..	4
	do. 29 do. ..	48
	Informal patients	54
(b)	Receiving visits by mental welfare officers at 31.12.66 ..	98
(c)	Financial assistance to residents in Winston House at 31.12.66	6
	<i>The Hawthorns Hostel.</i> Resident at 31.12.66.. .. .	3

THE BLIND AND PARTIALLY SIGHTED

The following tables show the work done by the three Home Teacher/Welfare officers during the year:

	<i>Male</i>	<i>Female</i>	<i>Total</i>
No. on register at beginning of year ..	93	143	236
Additions to register	16	16	32
Removals from register	12	21	33
No. on register at year end	97	138	235
No. of personal visits	355	444	799
No. of lessons given	61	32	93

NATURE OF LESSONS GIVEN

Braile ..	39	Pulpcane ..	32	Moon ..	17
Rug ..	1	Lampshades	1	Typewriting	3

In addition to the personal visits recorded in the tables, the Home Teacher/Welfare Officers made 374 miscellaneous visits and gave instruction at 51 sessions of the Tuesday Craft Class and 41 sessions at the St Raphael Club Craft Class. The combined number of attendances at these two classes during the year was 1,824.

Liaison is maintained with the Cambridgeshire Society for the Blind (who run two residential homes and a club in the City) and the Home Teachers have given some assistance to a group of blind people who have formed a rehabilitation club.

OTHER PHYSICALLY HANDICAPPED

The home teacher/welfare officers also visited persons with physical handicaps other than deficiency of sight, hearing or speech and the following tables show the work done.

	<i>Male</i>	<i>Female</i>	<i>Total</i>
No. on register at beginning of year ..	116	156	270
Additions to register	17	34	51
Removals from register	17	19	36
No. on register at year end	116	169	285
No. of personal visits	474	570	1044
No. of lessons given	45	13	58

NATURE OF LESSONS GIVEN

Embroidery	1	Toys ..	3	Rug ..	5
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One of our Home Teacher/Welfare Officers attends, every Wednesday afternoon, at the St Raphael Club for physically handicapped people, to assist with a handicraft class.

CERVICAL CYTOLOGY CLINICS

Weekly clinics were held on Friday afternoons at Auckland Road Clinic and at Romsey Clinic.

469 patients attended Auckland Road Clinic in 40 sessions

215 patients attended Romsey Clinic in 13 sessions

CHIROPODY SERVICE

An arrangement has been made with local Chiropodists in private practice whereby persons in the categories listed below who are recommended by their doctor or by the Public Health Department, may receive treatment at reduced rates. The work carried out is summarised in the following table.

PART 1. Number of persons treated during 1966

		<i>By Local Authority (1)</i>	<i>By Voluntary Organisations (2)</i>	<i>TOTAL (3)</i>
1.	Male over 65 Female over 60	307 1,907	— —	307 1,907
2.	Expectant mothers	—	—	—
3.	Children under 5	—	—	—
4.	Handicapped persons	17	—	17
5.	TOTAL	2,231	—	2,231

PART 2. Number of treatments given during 1966

		<i>By Local Authority (1)</i>	<i>By Voluntary Organisations (2)</i>	<i>TOTAL (3)</i>
1.	In clinics { including Old Peoples Social Centres and Clubs	165	—	165
2.	In patients homes	1,790	—	1,790
3.	In Old Peoples Homes	499	—	499
4.	In Chiropodists surgeries	11,234	—	11,234
5.	TOTAL	13,688	—	13,688

PART 3.	Number of treatments included in part 2 above which were paid for by the Authority on the basis of <i>fees per treatment</i> .	Local Authority	12,981
		Voluntary Organisations	—
		TOTAL	12,981

Part V

MISCELLANEOUS MATTERS

Health Education Posters were displayed and leaflets distributed, upon health topics, during the year, chiefly from our clinics. 53 Lectures were given by members of the department to various groups and organisations in the city. Demonstrations of infant feeding methods were given at the clinics.

Visitors to the Department As usual a considerable number of people visited the department to see our work or to receive instruction. They came, not only from this country, but from places as distant as Jamaica and Kenya.

Ambulance Service An Ambulance Service is provided by Cambridgeshire and Isle of Ely County Council and the vehicles are stationed at depots in Ditton Walk, Cambridge, Ely, Wisbech and March. There are 19 Ambulances, 5 Utilicons and 1 chair carrying vehicle.

Mass Radiography The Mass Radiography Unit of the East Anglian Regional Hospital Board offered facilities for the examination of Cambridge citizens during the year.

Research Work We continued to take part in the National Survey of Health and Development, organised by the Medical Research Council; also in the Survey of Childhood Cancers, organised by the Department of Social Medicine of Oxford University.

We assisted the Queen's Institute of District Nursing in the enquiry into the nature of district nurses' duties and the use of their time; also in some work for the Library Association upon print for partially sighted people.

We were able to afford facilities to workers in the University Department of Anatomy who were recording the occurrence of abdominal markings in children which have not previously been described.

